Community Leadership and Engagement Key Performance Indicators 2016/17
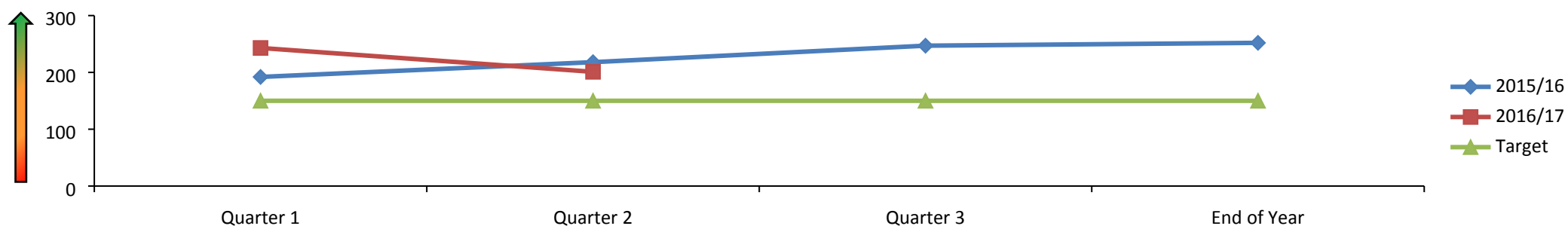
COMMUNITY LEADERSHIP AND ENGAGEMENT KPI 1 – The number of active volunteers		Quarter 2 2016/17
Definition	People who have actively volunteered their time in the previous 3 months within any area of Culture and Recreation or been deployed to volunteer by the volunteer coordinator Culture and Recreation.	**How this indicator works** This indicator measures the average monthly number of active volunteers that support Culture and Recreation, Healthy Lifestyle and Adult Social Care activities.
What good looks like	We are working towards a continuous increase in the number of active volunteers within the borough.	**Why this indicator is important** Volunteering not only benefits the individual volunteer by increasing their skills and experience, it also has a significant impact on the health and wellbeing on the community as a whole.
History with this indicator	Historically the number of active volunteers has been increasing. This is a result of increased awareness of volunteering opportunities, the diversity of roles on offer and the corporate shift to deliver some of the library offer to the community and volunteers at 2 sites.	**Any issues to consider** Volunteering can be more frequent during Summer months particular in support of outdoor events programmes such as Summer of Festivals.

Monthly average	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	243	201			
Target	150	150	150	150	↓
2015/16	192	218	247	252	

| **Performance Overview** **G** | Across the 3 months of Quarter 2 there was an average of 201 active volunteers. This exceeds the monthly target figure of 150 by 51 people and is 134% of the target. However, the figure is 17.28% (42 volunteers) lower than the end of Quarter 1 when the average was 243. The figure is also 7.80% lower than the corresponding period in 2015 -2016 when the average was 218 active volunteers. This could be for a number of reasons. 2015-2016 saw the Queens visit to the borough and the 50th anniversary events programme which offered a large number of volunteering opportunities and | **Actions to sustain or improve performance** | The success in achieving and maintaining these figures is due to the wide range of volunteer opportunities across the Culture and Recreation portfolio and the borough and summer events programme. There are also a number of public health funded projects running including Healthy Lifestyles, Change for Life programme and Volunteer Drivers Scheme which are attracting regular volunteer numbers. In addition, 2 Libraries are also now community run providing volunteer opportunities and opportunities for |

	months some of those people are no longer actively volunteering.		volunteering across the branch library network and Heritage Service are also in place.

Benchmarking	No benchmarking data available – local measure only

KPI 2 – The percentage of respondents who believe the Council listens to concerns of local residents (Annual Indicator)

Definition	Residents Survey question: 'To what extent does the statement "Listens to the concerns of local residents' apply to your local Council?" The percentage of respondents who responded with either 'A great deal' or 'To some extent'.	**How this indicator works**	Results via a telephone survey conducted by ORS, an independent social research company. For this survey, mobile sample was purchased by ORS, enabling them to get in contact with harder to reach populations. Interviews conducted with 1,101 residents (adults, 18+).
What good looks like	Good performance would see higher percentages of residents believing that the Council listens to their concerns.	**Why this indicator is important**	Results give an indication of how responsive the Council is, according to local residents.
History with this indicator	New performance indicator	**Any issues to consider**	Results were weighted to correct any discrepancies in the sample to better reflect the population of Barking & Dagenham, based on a representative quota sample. Quotas set on age, gender, ethnicity and tenure.

	Annual Result
2016/17	Due December 2016
Target	58%
2015/16	53%

Performance Overview	The next Resident's Survey will be conducted in Autumn 2016. Results are due for publication in December 2016.	Actions to sustain or improve performance	Actions to be determined following the release of survey results in December 2016.
n/a Awaiting data			
Benchmarking	London Average 2015/16: 64%		

COMMUNITY LEADERSHIP AND ENGAGEMENT			
KPI 3 – Impact / Success of events evaluation			Quarter 2 2016/17

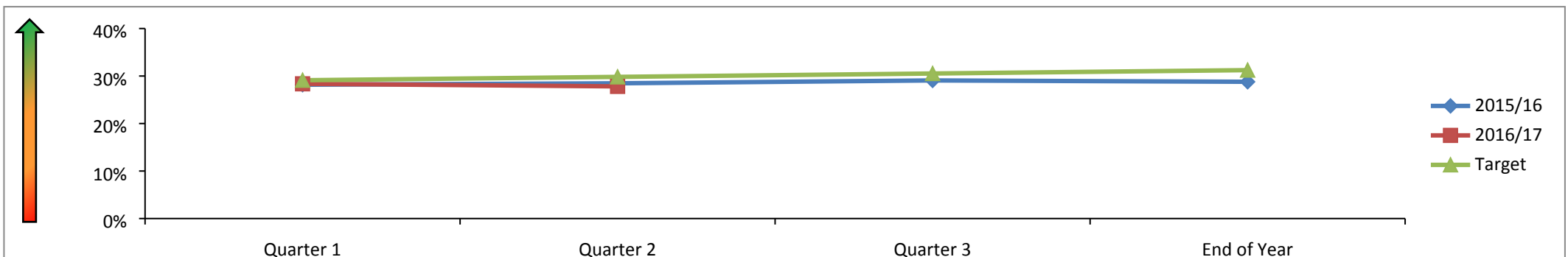| Definition	Survey of people attending the events to find out: • **Visitor profile:** Where people came from, Who they were, How they heard about the event • **The experience:** asking people what they thought of the event and how it could be improved. • **Cultural behaviour:** when they last experienced an arts activity; and where this took place.	How this indicator works	Impact / success is measured by engaging with attendees at the various cultural events running over the Summer. Results are presented in a written evaluation report.
History with this indicator	This is a new events evaluation for 2016.	**Any issues to consider**	The outdoor cultural events programme runs from June to September.
2016/17 Performance Results	We undertook a survey of people (409 responses) who attended three of the Summer of Festivals events (One Borough Community Day, Steam and Cider Fair, and the Roundhouse Music Festival) to develop a visitor profile, evaluate the quality of the experience and gain an understanding of cultural behaviour. The headline findings are as follows: • **100%** of respondents agreed that these events are worth doing every year and that they are a good way for people of different ages and backgrounds to come together. • **66%** of respondents live in the Borough • **43%** were first time attenders at the event • **56%** had attended an arts event in the previous 12 months • Roughly **25%** of respondents heard about the event from LBBD social media activity with a similar percentage for word of mouth or saw a poster, leaflet or banner.		
Additional information	When we asked people what they particularly liked about the events and how they think they could be improved, a number of recurring themes were identified: positive comments – free entry, atmosphere, good day out, family friendly; areas for improvement – more seating,		

	cost of rides, more variety of food on sale and more arts and crafts stalls.

Equalities and Cohesion Key Performance Indicators 2016/17

EQUALITIES AND COHESION			
KPI 4 – The percentage of Council employees from BME Communities			**Quarter 2 2016/17**
Definition	The overall number of employees that are from BME communities.	**How this indicator works**	This is based on the information that employees provide when they join the Council. They are not required to disclose the information and many chose not to, but they can update their personal records at any time they wish.
What good looks like	That the workforce at levels is more representative of the local community (of working age).	**Why this indicator is important**	This indicator helps to measure and address under-representation and equality issues within the workforce and the underlying reasons.
History with this indicator	The overall percentage of Council employees from BME Communities has been on an upward trend for a number of years but the rate of increase does not match that of the local population and the Borough profile.	**Any issues to consider**	A number of employees are "not-disclosed", and the actual percentage from BME communities is likely to be higher. Completion of the equalities monitoring information is discretionary and we are looking at how to encourage new starters to complete this on joining the Council and employees to update personal information on Oracle.

Monthly average	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	28.36%	27.82%			
Target	29.11%	29.82%	30.53%	31.24%	↓
2015/16	28.17%	28.47%	29.07%	28.79%	

Performance Overview			We continue to work with Business in the Community (BiC) to identify how other organisations have addressed under-representation within the workforce and non-disclosure.
	The latest employee's figures show a decrease	**Actions to sustain**	

A	actions highlighted in the previous action plan are taking time to take effect.		We will be undertaking the BiC benchmark for ethnicity, age and gender in October and following external analysis, will have a detailed understanding of how we compare against a national diversity and inclusion framework. The report should identify strengths and weaknesses, and provide us with tailored feedback and practical steps for improving performance in this area.
Benchmarking	Not applicable		

<table>
<tr><td colspan="2" style="background:#1F3864;color:white">EQUALITIES AND COHESION</td><td colspan="2" style="background:#1F3864;color:white">End of Year 2015/16</td></tr>
<tr><td colspan="4" style="background:#1F3864;color:white">KPI 5 – The percentage of residents who believe that the local area is a place where people from different backgrounds get on well together</td></tr>
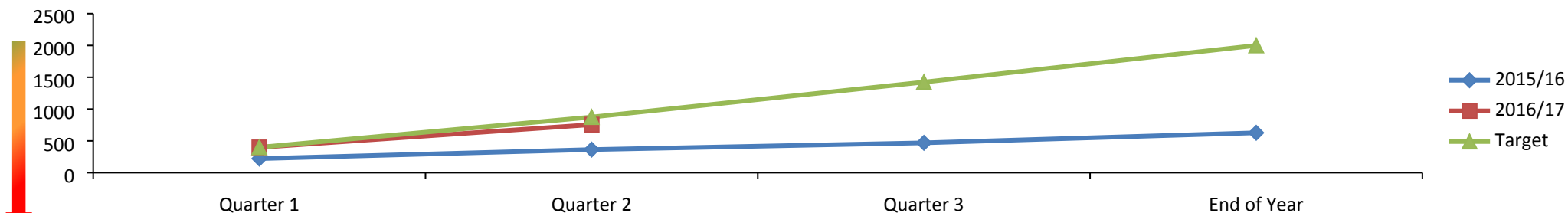<tr>
<td>Definition</td>
<td>Residents Survey question: 'To what extent do you agree that this local area is a place where people from different backgrounds get on well together"
The percentage of respondents who responded with either 'Definitely agree' or 'Tend to agree'.</td>
<td>How this indicator works</td>
<td>Results via a telephone survey conducted by ORS, an independent social research company. For this survey, mobile sample was purchased by ORS, enabling them to get in contact with harder to reach populations. Interviews conducted with 1,101 residents (adults, 18+).</td>
</tr>
<tr>
<td>What good looks like</td>
<td>An improvement in performance would see a greater percentage of residents believing that the local area is a place where people from different backgrounds get on well together.</td>
<td>Why this indicator is important</td>
<td>Community cohesion is often a difficult area to measure. However, this perception indicator gives some indication as to how our residents perceive community relationships to be within the borough.</td>
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<tr>
<td>History with this indicator</td>
<td>Although this question was included in the historical Place Survey, due to the survey methodology, results are not comparable.</td>
<td>Any issues to consider</td>
<td>Results were weighted to correct any discrepancies in the sample to better reflect the population of Barking & Dagenham, based on a representative quota sample. Quotas set on age, gender, ethnicity and tenure.</td>
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	Annual Result
2016/17	Due December 2016
Target	80%
2015/16	74%

Performance Overview	The next Resident's Survey will be conducted in Autumn 2016. Results are due for publication in December 2016.	Actions to sustain or improve performance	Actions to be determined following the release of survey results in December 2016.
n/a **Awaiting data**			
Benchmarking	National Average 2015/16: 86%		

Environment and Street Scene Key Performance Indicators 2016/17

ENVIRONMENT AND STREET SCENE KPI 6 – The weight of fly tipped material collected (tonnes)				Quarter 2 2016/17	
Definition	Fly tipping refers to dumping waste illegally instead of using an authorised method.	**How this indicator works**	(1) Fly-tip waste disposed at Material Recycling Facility and provided with weighbridge tonnage ticket to show net weight. The weights for all vehicles are collated monthly by East London Waste Authority (ELWA) and sent to boroughs for verification. (2) Following verification of tonnage data, ELWA sends the data to the boroughs and this is the source information for reporting the KPI.		
What good looks like	In an ideal scenario fly tipping trends should decrease year on year and below the corporate target if accompanied by a robust enforcement regime.	**Why this indicator is important**	In order to show a standard level of cleanliness in the local authority, fly tipping needs to be monitored. This reflects civic pride and the understanding the residents have towards our service and their own responsibilities.		
History with this indicator	2015/16 – 627 tonnes collected 2014/15 – 709 tonnes collected	**Any issues to consider**	During Christmas and New Year, fly-tipped waste tends to increase. Performance also fluctuates year on year depending on collection services on offer e.g. ceasing Green Garden waste collections from April 2017 if approved would increase fly-tipped materials significantly by an estimated 1000 tonnes or more.		

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	397 tonnes	755 tonnes			
Target	399 tonnes	874 tonnes	1,424 tonnes	2,000 tonnes	↓
2015/16	221 tonnes	363 tonnes	469 tonnes	627 tonnes	

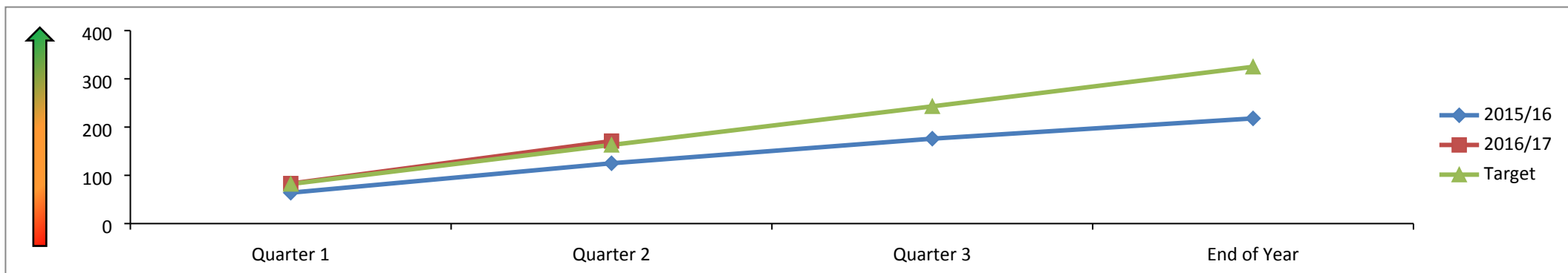|	Performance Overview			Work has also been carried out to monitor our waste tonnage data monthly to be more accurate and have found that there were some discrepancies where waste had being allocated to the wrong waste type. We are now confident that we measure fly-tipped waste separately from household bulky waste which has resulted in higher fly tipped waste when compared to last quarter. Fly-tipped waste correctly removed from the domestic waste stream also improves our recycling rates and residual waste per household indicators respective. Further work includes: • The continuing work of the area managers and enforcement team to pursue and prosecute fly-tippers. • Quick response to fly-tips stops them from building up and increasing the tonnage and may deter those who would add to existing fly-tips.
G	The quarter 2 cumulative results of 755 tonnes is lower that the target for the quarter of 874 tonnes, which is good for this indicator.	**Actions to sustain or improve performance**		
Benchmarking	We benchmark our fly tipping waste on a monthly basis with other ELWA partners. However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc).			

ENVIRONMENT AND STREET SCENE
KPI 7 – The weight of waste recycled per household (kg)   *Quarter 2 2016/17*

Definition	Recycling is any recovery operation by which waste materials are reprocessed into products, materials or substances whether for the original or other purposes.	**How this indicator works**	This indicator is the result of all recyclate collected through our brown bin recycling service, brink banks, RRC (Reuse & Recycling Centre) and 'back-end' recycling from the Mechanical and Biological Treatment (MBT) Plant. The total recycled materials weight in kilograms is divided by the total number of households in the borough (74,344 households 2016/17).
What good looks like	An increase in the amount of waste recycled per household.	**Why this indicator is important**	It helps us understand public participation. It is also important to evaluate this indicator to assess operational issues and look for improvements in the collection service.
History with this indicator	2015/16 – 218kg per household 2014/15 – 291kg per household	**Any issues to consider**	August recycling low due to summer holidays and from October to March due to lack of green waste recycling tonnages/rates are also low.

	Quarter 1	**Quarter 2**	**Quarter 3**	**End of Year**	**DOT from 2015/16**
2016/17	83 kg	171 kg			↑

Target	82 kg	163 kg	243 kg	325kg	
2015/16	64 kg	125 kg	176 kg	218kg	

Performance Overview	The direction of travel in quarter 2 is higher when compared to the previous year quarter 2 by 46kg. The green waste tonnages got to a good start this year when compared to last year. The captured recycling at the backend of the Mechanical and Biological Treatment plant at Frog Island also improved by 4.2% (following fire damage last year). Generally, the recycling rate this year is holding strong when compared to last year.	**Actions to sustain or improve performance**	The Waste Minimisation Team will look to tackle the issue of contamination as part of the kerbside collection, addressing this issue will be crucial to maintain LBBD's recycling rate.
G			
Benchmarking	We benchmark our recycling waste on a monthly basis with other ELWA partners. LBBD is ranked third out of the four ELWA boroughs (1st Havering; 2nd Redbridge; 3rd LBBD and 4th Newham). However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc.)		

ENVIRONMENT AND STREET SCENE **KPI 8 – The weight of waste arising per household (kg)**			**Quarter 2 2016/17**
Definition	Waste is any substance or object which the holder discards or intends or is required to discard and that cannot be recycled or composted.	**How this indicator works**	This indicator is a result of total waste collected through kerbside waste collections, Frizlands RRC, bulky waste and street cleansing minus recycling and garden waste collection tonnages. The residual waste in kilograms is divided by the number of households in the borough (74,344 households 2016/17).
What good looks like	A reduction in the amount of waste collected per household.	**Why this indicator is important**	It reflects the council's waste generation intensities which are accounted on a monthly basis. It derives from the material flow collected through our grey bin collection, Frizlands RRC residual

			waste, bulk waste and street cleansing collections services.
History with this indicator	2015/16 – 877kg 2014/15 – 952kg	**Any issues to consider**	Residual waste generally low in month of August due to summer holidays and high during Christmas/New Year and Easter breaks.

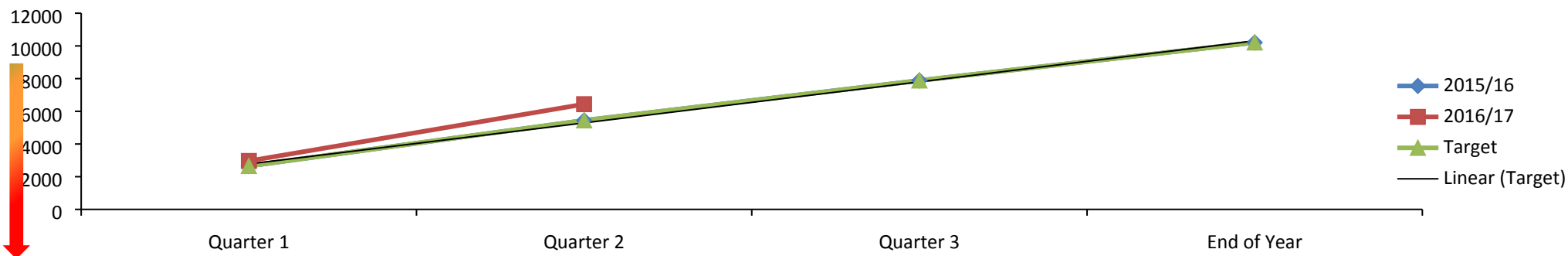|	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	232 kg	455 kg			↑
Target	233 kg	457 kg	669 kg	870 kg	
2015/16	257 kg	469 kg	662 kg	877 kg	

Performance Overview **G**	The direction of travel in quarter 2 is lower when compared to the previous year quarter 2 by 14 kg, which is good for this indicator. This good performance is due in part to the increase in the levels of recycling in the first and second quarters. Green waste has been higher this year when compared to last year.	**Actions to sustain or improve performance**	Work is being continued to police the number of large bins being delivered. Increased communications campaigns such as the one tonne tour and the slim your bin campaign are also ramping up through the winter. Corrections to waste reporting have started to have any impact on high household waste levels with waste being correctly categorised and removed from the household waste stream.
Benchmarking	We benchmark our fly tipping waste on a monthly basis with other ELWA partners. However, figures do not necessarily compare due to individual borough characteristics (population, housing stock etc.).		

Enforcement and Community Safety Key Performance Indicators 2016/17

KPI 9 – The number of ASB incidents reported in the Borough (ASB Team, Housing, Environmental and Enforcement and Police)
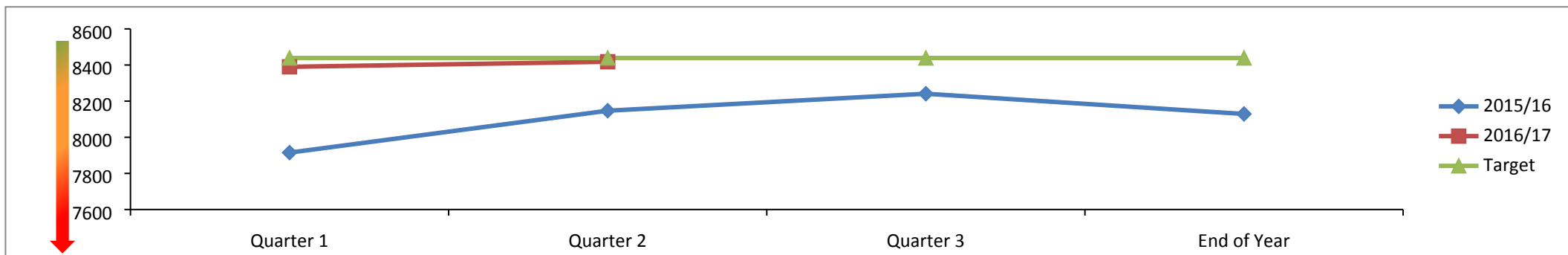
Definition	Anti-social behaviour (ASB) includes Abandoned Vehicles, Vehicle Nuisance, Rowdy/Inconsiderate Behaviour, Rowdy /Nuisance Neighbours, Malicious/Nuisance Communications, Street Drinking, Prostitution Related Behaviour, Noise and Begging.	How this indicator works	Simple count of ASB incidents reported to the following ASB services: The Council ASB Team, Environmental and Enforcement Services, Housing Services, Police
What good looks like	Ideally we would see a year on year reduction in ASB calls reported to the Police and Council.	Why this indicator is important	ASB is a Community Safety Partnership priority.
History with this indicator	2015/16: 10,208 calls 2014/15: 11,828 calls	Any issues to consider	Corporate reporting measures the combined number of ASB incidents reported to the Police and Council. Police only figures are also reported separately within the organisation.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	2,962	6,436			↓
Target	2,651	5,442	7,883	10,207	
2015/16	2,652	5,443	7,884	10,208	

Performance Overview **R**	Overall combined reports to ASB services YTD is up 18.2% (+993 incidents) ASB calls to the Police are up by 485 incidents (+17%). Overall there has been a 27% increase (up 624 incidents) in ASB reported to both the Council's ASB team and Environmental and Enforcement services as recorded in Flare YTD at Qtr 2 2016/17 compared to YTD at 2015/16 Qtr 2. ASB incidents reported to Housing (as recorded by the Capita system) YTD to Qtr 2 2016/17) is down by 83% compared to the same point last year although this is mainly due to recording issues.	Actions to sustain or improve performance	**Untidy gardens -** Housing is currently carrying out a 100% tenancy audit of all properties and the condition of the garden is part of the audit. **Rubbish -** In response to the increasing amount of rubbish and fly tipping on the estates, Housing has increased the bulk waste collection teams from two teams to four teams collecting fly tipping and bulk waste Monday to Friday. Housing has now extended this service to a 7 day service with one bulk team covering Saturdays and one bulk team covering Sundays. Housing has also invested in 20 new overt CCTV battery run cameras to target hot spot areas and prosecute offenders. **Weapons Sweep and Forensic -** Housing is working in partnership with Trident Central Gangs Unit to reduce the number of knives and other weapons hidden by gang members
Benchmarking	There is currently no mechanism to benchmark ASB incidents across London Councils.		

ENFORCEMENT AND COMMUNITY SAFETY	Quarter 2 2016/17
KPI 10 – The total number of Priority Neighbourhood Crimes	

Definition	The number of the 7 neighbourhood crimes (burglary, criminal damage, robbery, theft from a motor vehicle, theft from a person, theft of a motor vehicle and violence with injury) that occur in the borough	**How this indicator works**	The Mayor's Office for Policing and Crime (MOPAC) introduced London's first Police and Crime Plan which set out what the Mayor wanted to achieve by 2016 – reducing the 7 priority neighbourhood crimes.
What good looks like	The Police and Crime Plan set out MOPAC's challenge to the Metropolitan Police Service to cut 7 neighbourhood crimes by 20% on the 2011/12 baseline to the end of 2015/16.	**Why this indicator is important**	The MOPAC 7 have been identified as priority neighbourhood crime.
History with this indicator	Barking and Dagenham met the MOPAC challenge to reduce priority crimes by 20% by March 2016 from the 2011/12 baseline (10549), so performance was good. The London average during this period was 18.9% which means the target for London was not met but we achieved our contribution.	**Any issues to consider**	There will be seasonal variations for the individual crime types. The Mayor's office is reviewing the Mayor priorities and new targets will be issued in January 2017.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	8,390	8,418			
Target	8,439	8,439	8,439	8,439	↓
2015/16	7,915	8,147	8,241	8,129	

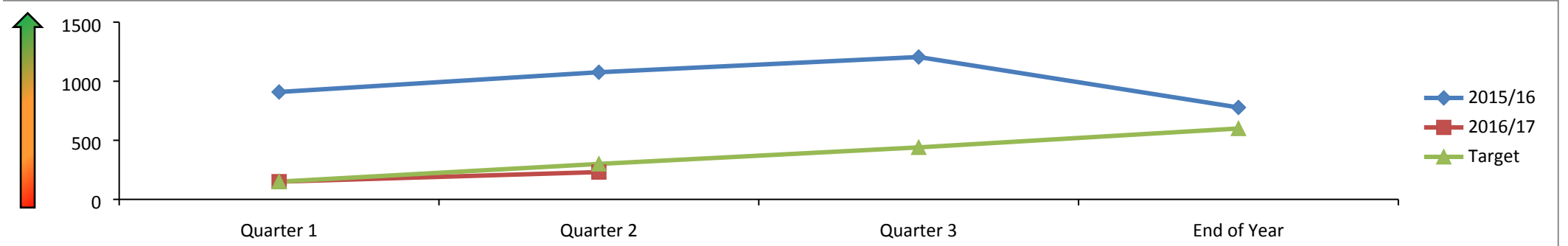| **Performance Overview**	Using rolling 12 month figures to (26th September 2016) (8418) the average across the year is -20.2% against the 2011/12 baseline (10,549).	**Actions to sustain or improve performance**	Burglary - Target hardening through the work of the Community Safety Team in crime prevention road shows. Robbery - Robust targeting of offenders and visible policing in areas identified through crime mapping. Criminal Damage - The Police's proactive response to criminal damage has increased, leading to an increase in the number of arrests for going equipped to commit criminal damage

G			<u>Theft from person:</u> In order to continue to tackle theft from person, the police are currently working on an initiative with the Safer Transport Command aimed at identifying and targeting known 'dippers'.
Benchmarking	The average across the Metropolitan Police is -16.5%.		

<table>
<tr><td colspan="4" style="background:#1F3864;color:white">ENFORCEMENT AND COMMUNITY SAFETY   Quarter 2 2016/17
KPI 11 – The number of properties brought to compliance by private rented sector licensing</td></tr>
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Definition	The number of unlicensed non-compliant properties brought to licence by the private sector.	**How this indicator works**	This indicates the activities relating to the number of unlicensed properties brought to licence through the licensing scheme.
What good looks like	An increase in the number of unlicensed properties brought to licence	**Why this indicator is important**	We are aware of 2000 properties that are currently unlicensed and are required to be licensed under the Housing Act 2004. As an enforcement service, we need to ensure those properties are brought into compliance through enforcement licensing intervention.
History with this indicator	The scheme has been live since September 2014, and compliance visits have now peaked, from the estimated 16,000 properties in the borough targeted for compliance.	**Any issues to consider**	Compliance visits are generally low during Christmas and year end due to staff taking holidays.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	150	231			
Target	150	300	440	600	↓
2015/16	909	1,985	3,190	909	

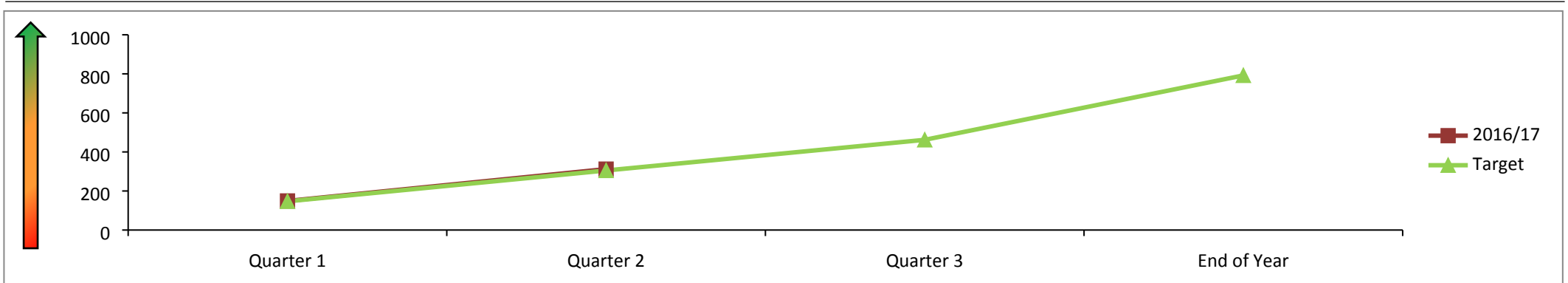| **Performance Overview**	Approximately 16,000 properties licensable properties where identified at the beginning of the PRL scheme on 2014. To date around 12,700 have applied for a licence. A further 2,000 are not	**Actions to sustain or improve**	There is a balance between tracking the unlicensed premises and compliance checks of those applied. We will continue with our commitment to inspect all properties that have applied for a licence. Pre booked appointments dependent upon landlords turning up or making contact with them. Monthly reviews on the number of applications made,

A	result, the target for the number of properties brought to compliance is low when compared to the previous quarter. Officers have been set a target of visiting 100 unlicensed properties per month, and through enforcement intervention aims to bring to licence 50 unlicensed properties. All landlords that fail to licence will be prosecuted.		compliance visits required will still be monitored. We shall also record the number of unlicensed inspections and those properties that have been brought to licence through enforcement activities. To date we have instigated 8 prosecution case.
Benchmarking	There is no national comparison but provisional benchmarking indicates that 6 visits a day per compliance officer would be reasonable. LBBD is the only borough that requires an inspection prior to licensing. Other Boroughs do not have direct targets for compliance visits. However, a working group for the LB of Waltham Forest and the LB of Enfield is now on-going and this is expected to show some constituency and comparison between boroughs.		

ENFORCEMENT AND COMMUNITY SAFETY   Quarter 2 2016/17
KPI 12 – The number of fixed penalty notices paid / collected
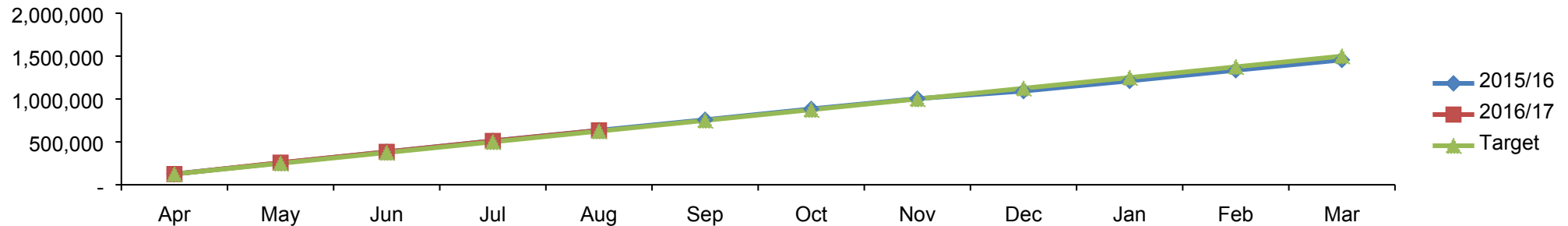
Definition	There is a target to issue 1,056 FPNs within the financial year. Of those issued a target collection rate of 75% has been set.	Why this indicator is important	This indicator shows how many FPNs are issued by the team on a monthly basis. This indicator allows Management to see if team outputs are reaching their minimum levels of activity which allows managers to forecast trends. It also allows the management team to track the % of FPNs that are recovered within the month.
What good looks like	This is a new indicator with no historical data for comparison. The direction of travel for this indicator could only be compared from quarter to quarter in this financial year 2016/17.	Any issues to consider	Enforcement activities are generally low during Christmas and year end due to staff taking holidays.
History with this indicator	There is a target to issue 1,056 FPNs within the financial year. Of those issued a target collection rate of 75% has been set.	Why this indicator is important	This indicator shows how many FPNs are issued by the team on a monthly basis. This indicator allows Management to see if team outputs are reaching their minimum levels of activity which allows managers to forecast trends. It also allows the management team to track the % of FPNs that are recovered within the month.

	Quarter 1	Quarter 2	Quarter 3	End of Year	DOT from 2015/16
2016/17	149	312			n/a
Target	147	305	462	792	
2015/16	New performance measure for 2016/17				

Performance Overview	A new service target of 1,056 FPN's per year has been set for 2016/17. This equates to 88 FPN's per month. The target for the percentage of fixed penalty notice paid/collected is set at 75%. Being a new indicator, this will be reviewed quarterly and the in-year adjustments made accordingly.	**Actions to sustain or improve performance**	The service is currently going through a restructure. Due to this the overall performance of the team is low due to this transitional period. Agency staffs have been recruited and are being trained. It is expected that the number of FPNs will rise steadily. Recruitment to permanent positions will take place over the next few months which will enhance the current performance of the service and provide a solid foundation to build on.
G			
Benchmarking	It is difficult to benchmark at present as the Team is developing its skills and working practices. Also, the service is currently going through a restructure. Due to this the overall performance of the team is low due to this transitional period.		

Social Care and Health Integration Key Performance Indicators 2016/17

SOCIAL CARE AND HEALTH INTEGRATION KPI 13 – The number of leisure centre visits			Quarter 2 2016/17
Definition	The number of visits to Abbey and Becontree leisure centres.	**How this indicator works**	The indicator shows the number of visits to Becontree and Abbey leisure centres.
What good looks like	The target for Leisure Centre Visits is 1,490,000	**Why this indicator is important**	Low levels of physical activity are a risk factor for ill health and contribute to health inequality. This indicator supports the council in successfully delivering the physical activity strand of the Health and Well Being Strategy. Meeting the target also supports the financial performance of the leisure centres.
History with this indicator	<u>Total Leisure Centre Visits:</u> 2013/14 = 1,244,668, 2014/15 = 1,282,430, 2015/16 = 1,453,925	**Any issues to consider**	Performance for July and August 2016 only. Performance for all the entire Quarter 2 period will be available at Quarter 3.

	Quarter 1	Quarter 2		Quarter 3	End of Year	DOT from 2015/16
2016/17	383,895	510,808	634,133			
Target	367,500	735,000		1,102,500	1,470,000	↑
2015/16	375,388	744,287		1,084,465	1,453,925	

Performance Overview	• There were 123,325 visits across both leisure centres in August 2016; a **1.2%** increase compared to August 2015. • To date there have been a total of 634,133 visits to both centres between April and August 2016. This figure compares to 619,990 between April and August 2015. This is an annual increase of 14,143 visits or **2.28%.** • Abbey has seen a slight reduction in numbers attending compared to the previous year for August and YTD with a 8.4% and 7.7% reduction respectively. • Becontree Heath has an increase of attendance for the month	**Actions to sustain or improve performance**	• The One Borough Show was attended by the leisure centre's active team to help promote the centres and memberships. A number of leads were generated which have been followed up. • A 'Summer Sizzler' health and fitness membership promotion was launched on 18 July and runs until 31 August 2016. The promotion is for a six week membership for £75.00. After six weeks there is a further offer of switching on to a direct debit membership without a joining fee. • A 'Summer Play Pass' soft play membership promotion was also launched on 25 July and runs until 31 August 2016.
G			

	compared to the previous year (1.9%) however the YTD figure has remained similar to the previous year.		The promotion is for unlimited 2 hour play sessions on weekdays throughout the summer holidays.
Benchmarking	No benchmarking data available - local measure only		

| **Definition** | Delayed transfers of care (delayed days) per 100,000 population aged 18 and over (attributable to either NHS, social care or both) per month.
A delayed transfer of care occurs when a patient is ready for transfer from a hospital bed, but is still occupying such a bed. A patient is declared medically optimised and ready to transfer by the clinician(s) involved in their care. The hospital setting can be acute, mental health or non-acute. | **How this indicator works** | This indicator measures the total number of delayed days recorded in the month regardless of the responsible organisation (social care/ NHS). The figures shown below are per 100,000 18+ residents.
Lower is better, in terms of performance, as it indicator that people are transferred as soon as they are able to do so. |
|---|---|---|---|
| **What good looks like** | Good performance would be under the BCF target of 418.32 delayed days per month (per 100,000 pop). | **Why this indicator is important** | This indicator is important to measure as the average number of delayed days per month (per 100,000 pop) is included in the Better Care Fund performance monitoring. |
| **History with this indicator** | The 2014/15 yearly average for the number of delayed days per month was 129.31 | **Any issues to consider** | Please note that these figures are taken from the Department of Health website and have **not** been verified by Barking and Dagenham Adult Social Care. |

DTOC per 100,000	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	183.74	150.08 (July)			
Target	418.32	418.32	418.32	418.32	↑
2015/16	158.03	197.53	213.66	252	
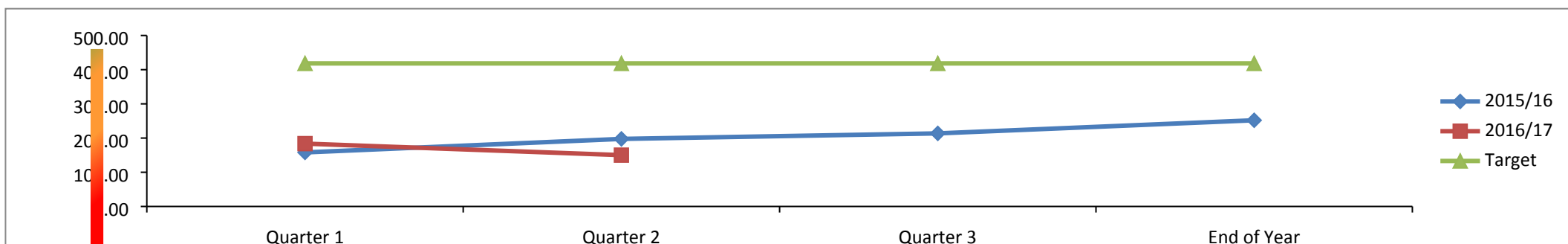
Performance Overview	**This indicator is reported 2 months in arrears, therefore for Q2 reporting data is only available for July.**	**Actions to sustain or**	There is currently a Delayed Transfers of Care Plan in place to reduce the number of delayed days. This is

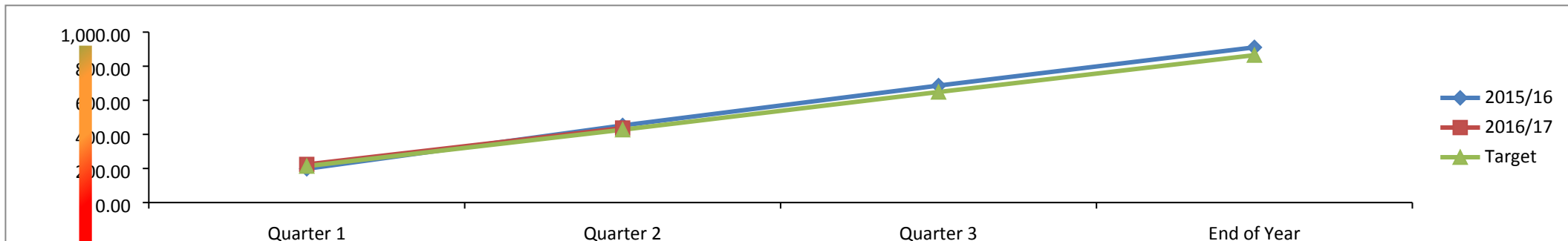| G	• Of the 214 days lost; 86 were the responsibility of the NHS, 55 were the responsibility of Social Care and 73 were joint responsibility. When the 214 days lost is converted to a 'per 100,000' figure it becomes 150.08. • Performance is good compared with both last year and the current average for England (below).		being monitored by the Joint Executive Management Committee who oversee the Better Care Fund.

	Redbridge		Havering		England	
Benchmarking	Total = 227	Per 100,000 = 102.43	Total = 319	Per 100,00 = 163.69	Total =184,188	Per 100,00 = 427.27

SOCIAL CARE AND HEALTH INTEGRATION	Quarter 2 2016/17
KPI 15 - The number of permanent admissions to residential and nursing care homes (per 100,000)	

Definition	The number of permanent admissions to residential and nursing care homes, per 100,000 population (65+)	**How this indicator works**	This indicator looks at the number of admissions into residential and nursing placements throughout the financial year, using a population figure for older people. A lower score is better as it indicates that people are being supported at home or in their community instead.
What good looks like	The Better Care Fund annual target has been revised to 170 admissions. This equates to 864.88 per 100,000 population	**Why this indicator is important**	The rate of permanent admissions to residential and nursing care homes is a good indication that people are supported in their own homes or in the community rather than being placed into long term residential care.
History with this indicator	2014-15 - 177 admissions, 905.9 per 100,000 2015-16 - 179 admissions, 910.0 per 100,000.	**Any issues to consider**	Not applicable

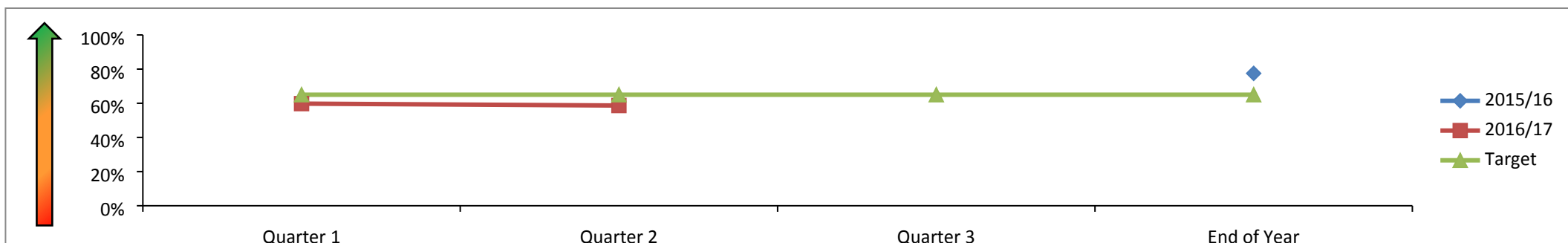|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	223.7	437.24			↑
Target	213.67	427.34		864.88	
2015/16	198.28	452.49	686.36	910.7	

Performance Overview **A**	In the year to date there have been 86 admissions to care homes, equivalent to 437.24 per 100,000 people. The rate of admissions is slightly below the same period in 2015-16 which had a value of 452.49 per 100,000 (89 admissions). Although the number of permanent admissions appears to be relatively high it is almost matched by the number of discharges from care homes. Since April there have been 86 admissions to79 discharges.	**Actions to sustain or improve performance**	A driving force of our admissions has been our relatively low residential and nursing care payment rates compared with those for support in the community. In order to bring our rates more in line with other local authorities a permanent uplift to both the residential and nursing care payments took effect from 1st April 2016 and we have adjusted the indicative budget limits in the Resource Allocation System to reflect the changes and to allow more people to live at home in the community.
Benchmarking	2015-16 ASCOF comparator group average - 600.10, national average - 628.20.		

SOCIAL CARE AND HEALTH INTEGRATION	**Quarter 2 2016/17**
KPI 16 – The percentage of people who received a short term service that went on to receive a lower level of support or no further service	

Definition	The proportion of new clients who received a short-term service during the year where the sequel to service was either no on-going support or support of a lower level.	**How this indicator works**	It includes the number of new clients who had short-term support to maximise their independence (known locally as Crisis Intervention) and then went on to receive low level support or no further support. A higher score is better as it indicates the success of Crisis Intervention
What good looks like	A higher proportion of clients with no ongoing care needs indicates the success of Crisis Intervention in supporting people who have a crisis and helping them to remain living independently.	**Why this indicator is important**	The aim of short-term services is to re-able people and promote their independence. This measure provides evidence of a good outcome in delaying dependency or supporting recovery - short-term support that results in no further need for services.

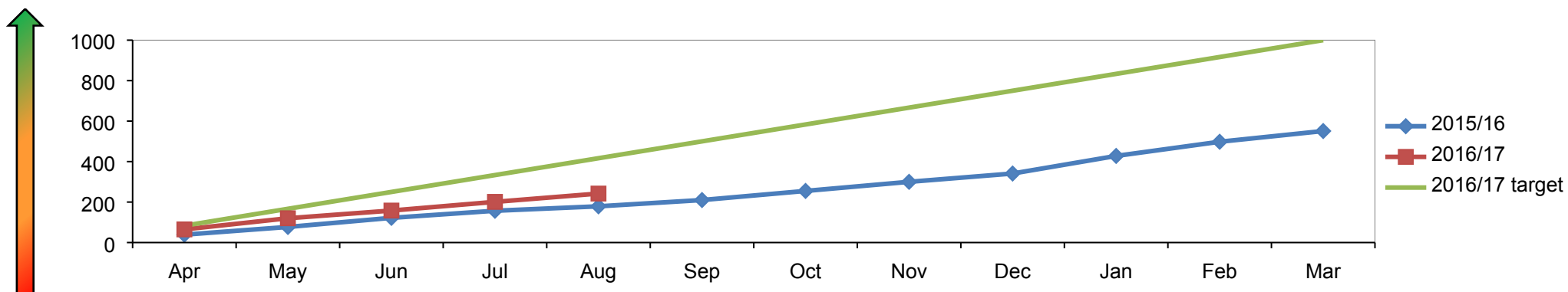| History with this indicator	It is being reported in year for the first time in 2016-17. The previous annual values were: 2014-15 - 55% 2015-16 – 78.5%			Any issues to consider	Since 2014-15 this indicator had been calculated annually based on figures submitted in the Short and Long Term statutory return. 2016-17 is the first year it is reported in-year.	
	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**		**DOT from 2015/16**
2016/17	59.78%	58.68%				
Target	65%	65%	65%	65%		**n/a**
2015/16	Indicator previously measured annually			77.5%		

Performance Overview	During Quarter 2 58.68% of people who received a Crisis Intervention service went to receive a lower level of support or no further services. Our Q2 outturn is currently below the annual target of 65%.	Actions to sustain or improve performance	The indicator was previously reported annually in the Adult Social Care Outcomes Framework using data submitted the Short and Long Term (SALT) statutory return. It is being reported in year for the first time in 2016-17, using the national definition and description. Whilst in year information for 2015-16 is not currently available, work is ongoing to calculate historic values so that we can refine our target and compare our in year performance with last year's.
A			
Benchmarking	2015-16 ASCOF comparator group average – 70.8% , national average – 75.8%		

SOCIAL CARE AND HEALTH INTEGRATION   Quarter 2 2016/17

KPI 17 – The number of successful smoking quitters aged 16 and over through cessation service

Definition	The number of smokers setting an agreed quit date and, when assessed at four weeks, self-reporting as not having smoked in the previous two weeks.	How this indicator works	A client is counted as a 'self-reported 4-week quitter' when assessed 4 weeks after the designated quit date, if they declare that they have not smoked, even a single puff of a cigarette, in the past two weeks.

What good looks like	For the number of quitters to be as high as possible and to be above the target line.	**Why this indicator is important**	The data allows us to make performance comparisons with other areas and provides a broad overview of how well the borough is performing in terms of four week smoking quitters.
History with this indicator	2012/13: 1,480 quitters 2013/14: 1,174 quitters 2014/15: 635 quitters 2015/16: 551 quitters	**Any issues to consider**	Due to the nature of the indicator, the quit must be confirmed at least 4 weeks after the quit date. This means that the data will likely increase upon refresh next month. Data is released with a time lag, so performance up to August is presented.

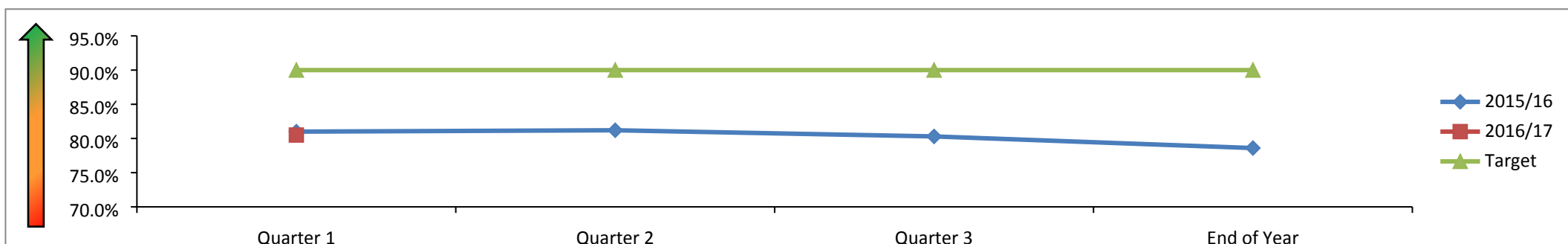|	Quarter 1	Quarter 2		Quarter 3	Quarter 4	DOT from 2015/16
2016/17	158	201	242			
Target	250	500		750	1,000	↑
2015/16	122	210		341	551	

Performance Overview **R**	Between April and August 2016/17 there have been 242 quitters. This is 58% achieved against the year to date target of 417. At the end of August 2015/16 there had been 189 quitters which equated to 15.8% against the previous year to date target of 1,200 quitters. Although the indicator is RAG rated as Red there has been a 28% improvement in numbers quitting based on 2015/16 performance.	**Actions to sustain or improve performance**	It should be noted that the Tier 3 service (specialist team based in the council, focused on targeted groups and pregnancy) are delivering the most quits and are on course to meet their yearly target, with 119 quits (47.2% of all quits in the borough). Pharmacies are delivering the next highest number of quits, with GPs performing very poorly. There are particularly good outcomes for pregnant smokers following LBBD's decision to introduce the BabyClear scheme: midwives completing CO screening at bookings is at 93.5% and we have reduced our smoking at time of delivery prevalence from 10.8% to 7.7%. Recent PHE figures also show a decrease in prevalence from 23% in 2014 to 18% in 2015 in Barking and Dagenham.
Benchmarking	Between April and December 2015 there were 512 quitters in Havering and 472 quitters in Redbridge.		

KPI 18 – The percentage uptake of MMR (Measles, Mumps and Rubella) vaccination (2 doses) at 5 years old

Definition	Percentage of children given two doses of MMR vaccination by their fifth birthday.	How this indicator works	MMR 2 vaccination is given at 3 years and 4 months to 5 years. This is reported by COVER based on RIO/Child Health Record.
What good looks like	Quarterly achievement rates to be above the set target of 95% immunisation coverage.	Why this indicator is important	Measles, mumps and rubella are highly infectious, common conditions that can have serious, potentially fatal, complications, including meningitis, swelling of the brain (encephalitis) and deafness. They can also lead to complications in pregnancy that affect the unborn baby and can lead to miscarriage.
History with this indicator	2011/12: 82.8%, 2012/13: 85.5%, 2013/14: 82.3%, 2014/15: 82.7%, 2015/16: 80.3%	Any issues to consider	Quarter 2 data 2016/17 is expected to be available January 2017.

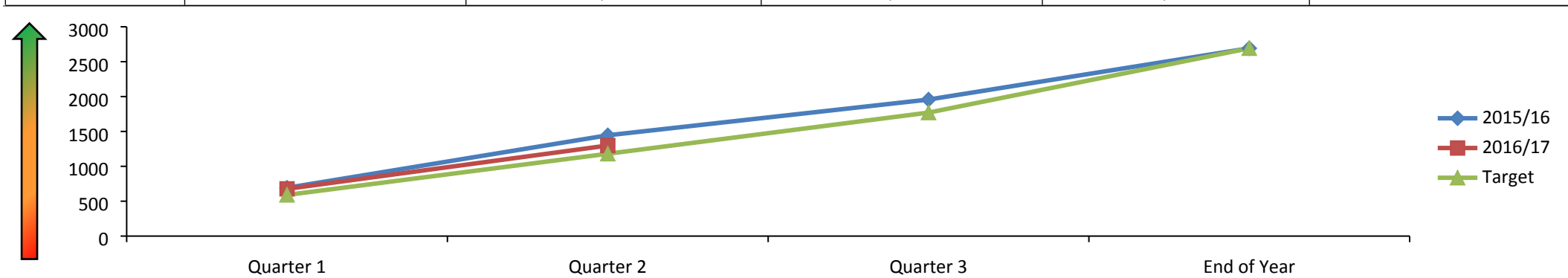|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	80.5%	Available January 2017			
Target	90%	90%	90%	90%	↓
2015/16	81.0%	81.2%	80.3%	78.6%	

| Performance Overview **R** | Poor performance is seen across the whole of London with this indicator, and the borough's performance is similar to the London average but is below the national average for England. Low immunisation coverage is a risk to unimmunised children who are at risk of infection from the vaccine-preventable diseases against which they are not protected. | Actions to sustain or improve performance | Ensure Barking and Dagenham GP Practices have access to I.T. support for generating immunisation reports. Children who persistently miss immunisation appointments followed up to ensure they are up to date with immunisations. Identifying what works in the best performing practices and share. Practice visits are being carried out to allow work with poor performing practices in troubleshooting the barriers to increasing uptake. Encourage GP practices to remove ghost patients. |

Benchmarking	In quarter 1 2016/17, Barking and Dagenham's MMR2 rate (80.5%) was similar to the London rate (80.2%)

SOCIAL CARE AND HEALTH INTEGRATION — Quarter 2 2016/17

KPI 19 – The number of children and adult referrals to healthy lifestyle programmes

Definition	The number of children and adult referrals to healthy lifestyle programmes	How this indicator works	The number of referrals to the Child Weight Management scheme.
What good looks like	Achieving the 2016/17 target of 2,360 referrals.	Why this indicator is important	The Child Weight Management programme allows the borough's GPs and health professionals to refer individuals who they feel would benefit from physical activity and nutrition advice to help them improve their health and weight conditions.
History with this indicator	2015/16: 2,692 referrals against a target of 3,301	Any issues to consider	

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	677	1,298			
Target	590	1,180	1,770	2,360	↓
2015/16	692	1,445	1,957	2,692	

Performance Overview	As of September 2016 the service has achieved 1,298 referrals, 55% of the set target of	Actions to sustain or improve performance	Officers to attend the Healthy Weight Alliance to encourage partners to promote and refer to the programme. Decisions need to be made regarding data sharing of the NCMP. Pre-diabetes clinics are being set up at local GP surgeries, where a lifestyle coach will be carrying our lifestyle assessments and referring patients to the programmes. To date, 5 GP practices have signed up.
G			An application has been sent to the CCG requesting a time slot at the GP's and Practice nurses PTI meetings. PTI meeting to be attended to promote the new referral software. Retention - drop out seems to be around the 7/8 week mark so we are looking at running a more intensive shorter course as a pilot, condensing the programme to 6 weeks by either running 2 hours sessions or 2 separate

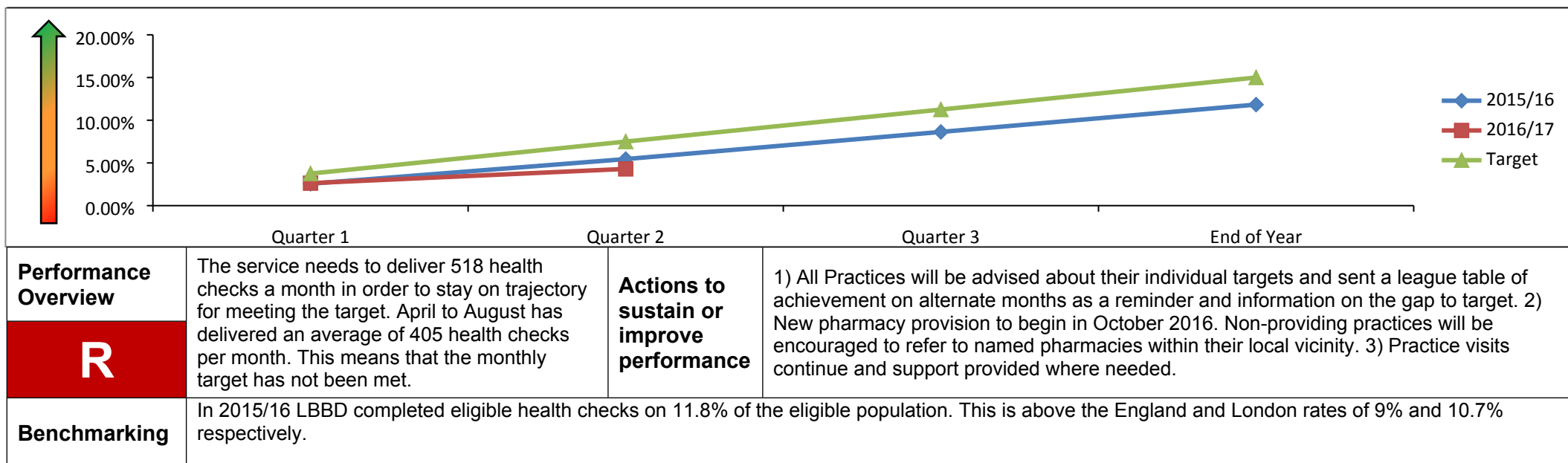|		
 		sessions per week. This would not reduce the content or quality of delivery. A full evaluation of the effectiveness of all the Healthy Lifestyle programmes is currently being undertaken by Public Health. This evaluation will cover performance around referral pathways, retention levels and outcomes (including benchmarking) and will also include a review of the Healthy Lifestyle Hubs and integrated working models
Benchmarking	No benchmarking data available – local measure only.	

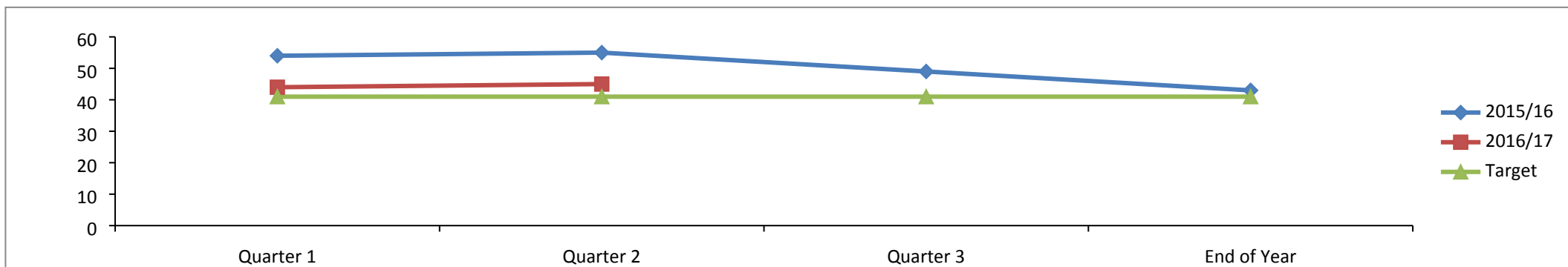| SOCIAL CARE AND HEALTH INTEGRATION				Quarter 2 2016/17	
KPI 20 – T Those aged 40-74 who receive Health Check					

Definition	The NHS Health Check is a 5-year programme offered to people between the ages of 40 – 74yrs who have not previously been diagnosed with long term conditions, particularly - **heart disease, stroke, diabetes, chronic kidney disease** and certain types of **dementia** (eligibility criteria). Depending on the results of the risk score following the assessment, some patients may need to be referred to the relevant lifestyle programme or potentially included on a disease register. **Data reporting**: Performance as a percentage of the 5-year programme. **Time period**: April 2016 to March 2017.	**How this indicator works**	The programme is a 5 year rolling programme that intends to invite 100% of its eligible population to receive a Health Check. Evidence suggests that for the programme to be truly cost effective nationally, 75%of those offered should receive a NHS Health Check. Number offered Health Check- maximum 20% of the population annually Number received Health Check – aspirational* 75% of those offered *PHE requests that this figure should at least be better than the previous year data.
What good looks like	• Improvement on the previous year's performance. • Increased numbers of patients diagnosed with long term conditions. • Increased numbers of referrals made to existing lifestyle programmes.	**Why this indicator is important**	The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes, and kidney disease. It is a key approach for new patients to be identified and clinically managed with long term conditions to prevent premature deaths; also to influence lifestyle choices of patients to improve their overall health and wellbeing.
History with this indicator	2012/13*: 10.0%, 2013/14*: 11.4% received 2014/15*: 16.3%, 2015/16*: 11.7% received *Please note this is a fraction of the 5-year programme	**Any issues to consider**	There is sometimes a delay between the intervention and data capture- this means that the data is likely to increase upon refresh next month.

	Quarter 1	Quarter 2		Quarter 3	Quarter 4	DOT from 2015/16
2016/17	2.63%	3.44%	4.30%			
Target	3.75%	7.50%		11.25%	15.0%	↓
2015/16	2.56%	5.45%		8.63%	11.83%	

Performance Overview **R**	The service needs to deliver 518 health checks a month in order to stay on trajectory for meeting the target. April to August has delivered an average of 405 health checks per month. This means that the monthly target has not been met.	**Actions to sustain or improve performance**	1) All Practices will be advised about their individual targets and sent a league table of achievement on alternate months as a reminder and information on the gap to target. 2) New pharmacy provision to begin in October 2016. Non-providing practices will be encouraged to refer to named pharmacies within their local vicinity. 3) Practice visits continue and support provided where needed.
Benchmarking	In 2015/16 LBBD completed eligible health checks on 11.8% of the eligible population. This is above the England and London rates of 9% and 10.7% respectively.		

SOCIAL CARE AND HEALTH INTEGRATION — Quarter 2 2016/17

KPI 21 – The number and rate per 10,000 of children subject to child protection plans

Definition	The number and rate of children subject to Child Protection Plans per 10,000 of the under 18 population (60,324).	**How this indicator works**	This indicator counts all those children who are currently subject to a Child Protection plan, and this is divided by the number of children in the borough aged 0-17 to provide a rate per 10,000.
What good looks like	To be in line with population change and rate per 10,000 to be in line with benchmark data and in particular in line with London rate.	**Why this indicator is important**	This is monitored to ensure that children who are at significant risk are identified and monitored in accordance to law and threshold of the borough.
History with this indicator	CP numbers and rates have fluctuated over the last few years – Rate per 10,000 was 55 in 2011, before falling to 36 in 2013. The rate rose to 60 in 2015, but has since fallen back to 45 per 10,000 as at Q2 2016/17.	**Any issues to consider**	No current issues to consider.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17 Number	259	271			
2016/17 Rate	44	45			**n/a**
Target Rate	41	41	41	41	
2015/16 Number	320	323	292	253	

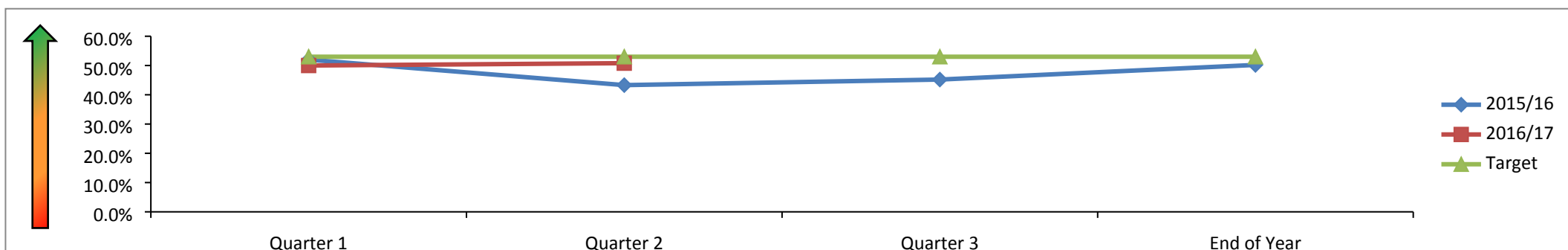| 2015/16 Rate	54	55	49	43	

Performance Overview	As at the end of September 2016, Barking and Dagenham had 271 children subject to child protection plans, representing a rate of 45 per 10,000 children aged 0-17. Although child protection numbers are generally increasing this financial year, numbers are lower than this time last year (323). The rate per 10,000 is now 45, which is higher than national rate (43) and the London rate (41). The borough's child protection rate per 10,000 is, however, lower than our statistical neighbours (52).	Actions to sustain or improve performance	Local weekly and monthly monitoring is in place.
A			
Benchmarking	Based on the borough's rate per 10,000, performance is close to the local target set at the London rate of 41 per 10,000 and RAG rated amber.		

SOCIAL CARE AND HEALTH INTEGRATION	Quarter 2 2016/17
KPI 22– The percentage of Care Leavers in employment, education, or training	

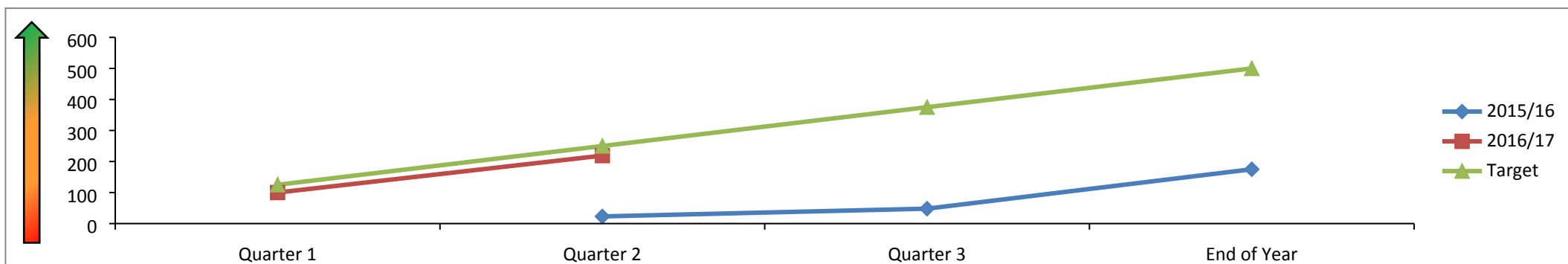| Definition	The number of children who were looked after for a total of 13 weeks after their 14th birthday, including at least some time after their 16th birthday and whose 17th, 18th, 19th, 20th or 21st birthday falls within the collection period and of those, the number who were engaged in education, training or employment on their 17th, 18th, 19th, 20th or 21st birthday	How this indicator works	This indicator counts all those in the definition and of those how many are in EET either between 3 months before or 1 month after their birthday. This is reported as a percentage.
What good looks like	Higher the better	Why this indicator is important	The time spent not in employment, education or training leads to an increased likelihood of unemployment, low wages, or low quality work later on in life.

History with this indicator	The cohort for this performance indicator has been expanded to include young people formally looked after whose 17th, 18th, 19th, 20th or 21st birthday falls within the collection period i.e. the financial year.	**Any issues to consider**	Care leavers who are not engaging with the Council i.e. we have no contact with those care leavers so their EET status is unknown; or in prison or pregnant/parenting are counted as NEET.	

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	50.0%	50.8%			
Target	53%	53%	53%	53%	⬆
2015/16	52.0%	43.3%	45.2%	50.2%	

Chart legend: 2015/16, 2016/17, Target

Performance Overview **A**	In Q2 2016/17, 51% of care leavers were in EET (60 out of 118 care leavers), comparable with the 2015/16 year-end figure. Performance is above National and statistical neighbours, but below London average of 53%. The 2016/17 target has been set to bring us in line with the London position and currently performance is RAG rated amber based on progress to target.	**Actions to sustain or improve performance**	The L2L service has developed a detailed action plan to address EET.
Benchmarking	London average 53%, National average 48%, Statistical Neighbour Average 48%		

SOCIAL CARE AND HEALTH INTEGRATION	**Quarter 2 2016/17**
KPI 23 – The number of turned around troubled families (rolling figure)	

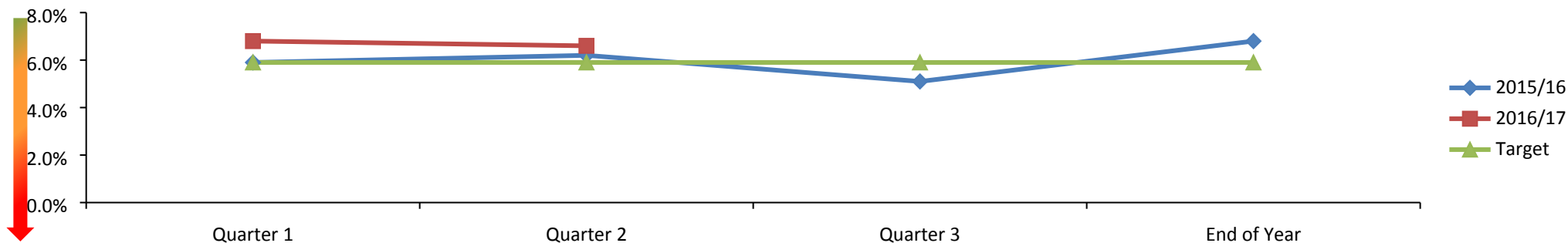|			
Definition	Number of families turned around - have met all the outcomes on their outcome plan and have shown significant and sustained improvement (rolling figure) (TF2)	**How this indicator works**	The term turned around family refers to a family who have met all the outcomes of their action plan, and sustained these outcomes for a sustained period of between 3 months – 12 months as per the Troubled Families Programme.

What good looks like	The higher the better.	**Why this indicator is important**	TF2 is a PbR programme set out by DCLG. LBBD are committed to turn around 500 families in 2016/17, which is set out by the funding arrangements for the programme until 2020. DCLG are encouraging front loading the programme to enable successful outcomes in 2020. LBBD are committed to turn around 2,515 families by April 2020.		
History with this indicator	Please see table below.	**Any issues to consider**	No current issues to consider.		

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	100	219			⬆
Target	125	250	375	500	
2015/16	n/a	23	48	175	

Performance Overview	Since the TF2 programme commenced (September 2015), 394 claims have been submitted to DCLG (175 between September 2015 to March 2016 and 219 as at the end of Q2 2016/17. Performance is RAG rated Red based on progress to target – 31 claims off target of 250 as at Q2. However, performance is very close to target and Amber status. DCLG is extremely positive about our TF progress and intervention work. We have an indicative target of 11 claims per week to meet the claim target of 500 claims per year.	**Actions to sustain or improve performance**	Claims can be submitted for sustained progress and improved outcomes against any combination of the problems listed; getting a family member into work 'trumps' all other criteria. The DCLG Troubled family's claims window is also now open continuously with payments being made quarterly.

A DCLG spot check on claims/process undertaken in June 2016 produced very positive comments. |
| **R** | | | |
| **Benchmarking** | Benchmark data is not available to date. | | |

Educational Attainment and School Improvement Key Performance Indicators 2016/17

EDUCATIONAL ATTAINMENT AND SCHOOL IMPROVEMENT		Quarter 2 2016/17
KPI 24 – The percentage of 16 to 18 year olds who are not in education, employment or training (NEET)		

Definition	The percentage of resident young people academic age 16 – 18 who are NEET according to DfE NCCIS guidelines	**How this indicator works**	Data is taken from monthly MI figures published by our regional partners and submitted to DfE in accordance with the NCCIS requirement.
What good looks like	A greater number of young people in education, employment or training, reducing the number of NEETs.	**Why this indicator is important**	The time spent not in employment, education or training leads to an increased likelihood of unemployment, low wages, or low quality work later on in life.
History with this indicator	2014/15 – End of year result 6% 2015/16 – End of year result 6.8%	**Any issues to consider**	The DfE has confirmed that from September 2016 NEETs and Unknowns will be reported and published as a joint figure for Year 12 and 13 (academic age 16 and 17) only. The new joint NEET + Unknown measure from September will take account of the distorting effects of the relationship between the two measures and more reflect the statutory cohort of 16 and 17 year olds.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	6.8%	6.6% (July & August)			
Target	5.9%	5.9%	5.9%	5.9%	↓
2015/16	5.9%	6.2%	5.1%	6.8%	

Performance Overview **R**	Between Q1 and Q2, the proportion of NEETs fell by 0.2% compared with a rise of 0.5% nationally and 0.4% in London over the same period. Compared with the same period last year, the borough's unadjusted (actual) NEET figure increased by 20 young people. NEET figures between July and September are affected by the expiry dates of positive destinations in the summer vacations	**Actions to sustain or improve performance**	From September 2016, the focus will be on tracking and maintaining contact with the statutory RPA cohort of 16 and 17 year olds although 18 year olds University destinations will continue to be logged. The current focus on ensuring all Year 11 young people have a September offer in place has necessarily improved communication channels with this cohort; the import of contact details directly through school's live data feeds on X-Vault should make contacting young people more efficient in the future. A more effective system for sending NEET young people texts and

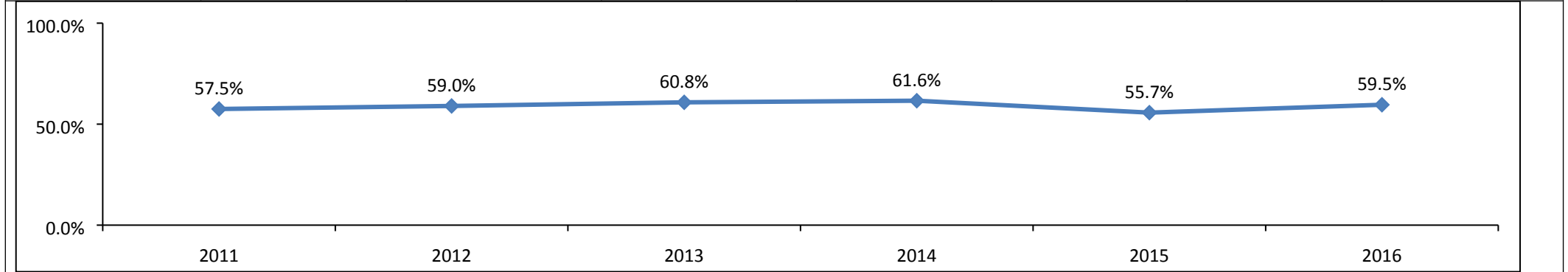|	making unknowns variable during this period. Tracking over the summer was also affected by staff changes during this period.		emails of opportunities has also been established.
Benchmarking	London Average – 3.1% National Average 4.2%		

Definition	This indicator shows the percentage of pupils at the end of Key Stage 4 achieving grades A*-C in both English and maths GCSEs.	**How this indicator works**	To be counted in the indicator, pupils must have achieved the equivalent of grade C or above in both English and mathematics GCSEs.
What good looks like	For the percentage of pupils achieving this standard to be as high as possible, improving each year to above national and our target is to reach London standards.	**Any issues to consider**	This education measure is important because it improves the life chances of our young people in the borough, enabling them to stay on in sixth form and choose the right A Levels or to access other appropriate training. Please note from 2016 new education measures are going to be reported and published e.g. Attainment 8 and Progress 8.

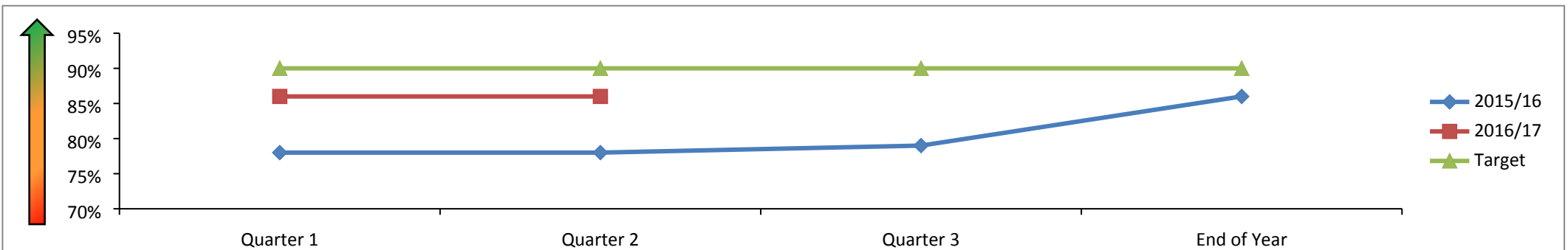| **History with this indicator**	**2011**	**2012**	**2013**	**2014**	**2015**	**2016**	**DOT from 2015**
	57.5	59.0	60.8	61.6	55.7	59.5*	↑

Performance Overview	2016 provisional headline result for the borough at A*-C English and maths show marked improvement on 2015 with a 3.8 percentage point rise to 59.5%. This reverses last year's dip and importantly is a result of all of our schools improving on the 2015 performance.	**Further Performance comments**	2016 sees the introduction of some significant changes to national performance measures. The percentage of pupils achieving 5 or more GCSE grades A*-C including English and maths as the headline indicator has been removed and replaced by A*-C in English and maths.

A			
Benchmarking	Performance for 2016 is just above national (58.7%), in line with statistical neighbours (59.9%) but below London (65.9%) average.		

EDUCATIONAL ATTAINMENT AND SCHOOL IMPROVEMENT — Quarter 2 2016/17

KPI 26 – The percentage of borough schools rated as good or outstanding

Definition	Percentage of Barking and Dagenham schools rated as good or outstanding when inspected by Ofsted. This indicator includes all schools.	**How this indicator works**	This indicator is a count of the number of schools inspected by Ofsted as good or outstanding divided by the number of schools that have an inspection judgement. It excludes schools that have no inspection judgement. Performance on this indicator is recalculated following a school inspection. Outcomes are published nationally on Ofsted Data View 3 times per year (end of August, December and March).
What good looks like	The higher the better.	**Why this indicator is important**	This indicator is important because all children and young people should attend a good or outstanding school in order to improve their life chances and maximise attainment and success. It is a top priority set out in the Education Strategy 2014-17 and we have set ambitious targets.
History with this indicator	Please see below. Performance has risen from 78% in Q1 15/16, to 86% as at 31st August 2016.	**Any issues to consider**	No current issues to consider.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	86%	86%			
Target	90%	90%	90%	90%	↑
2015/16	78%	78%	79%	86%	

Performance Overview	The percentage of schools in LBBD judged 'outstanding' or 'good' has improved from 79% to 86% as at the end at 31st August 2016. Ofsted will commence school inspections in the new term from September onwards. We have an ambitious ultimate target of 100% with a 2016/17 target of 90% representing a milestone on the way to this. We are closing the gap to target.	Actions to sustain or improve performance	Inspection outcomes for schools remains a key area of improvement to reach the London average and then to the council target of 100% as outlined in the Education Strategy 2014-17. Intensive Local Authority support, the brokering of school to school support from outstanding leaders and Teaching School Alliances and the increasing capacity of school clusters is being provided to vulnerable schools.
A	Of the remaining 6 Requires Improvement schools, 3 of these schools, if inspected, should be judged as good, taking us to 90%, in line with the London average of 90%. 2 of the remaining 3 schools have monitoring boards in place and are being supported by schools with outstanding leadership, while the remaining RI school is part of a strong federation.		
Benchmarking	London Average – 90% National Average – 86% (as at 31st March 2016).		

Finance, Growth and Investment Key Performance Indicators 2016/17

FINANCE, GROWTH AND INVESTMENT			Quarter 2 2016/17
KPI 27- The number of new homes completed (Annual Indicator)			
Definition	The proportion of net new homes built in each financial year	**How this indicator works**	Each year the Council updates the London Development Database by the deadline of August 31. This is the London-wide database of planning approvals and development completions.
What good looks like	The Council's target for net new homes is in the London Plan. Currently this is 1236 new homes per year.	**Why this indicator is important**	It helps to determine whether we are on track to deliver the housing trajectory and therefore the Council's growth agenda and the related proceeds of development, Community Infrastructure Levy, New Homes Bonus and Council Tax.
History with this indicator	14/15- 512 13/14 – 868 12/13 – 506 11/12 – 393 10/11 - 339	**Any issues to consider**	The Council has two Housing Zones (Barking Town Centre and Barking Riverside Gateway) which are charged with the benefit of GLA funding to accelerate housing delivery in these areas. There are 13,000 homes with planning permission yet to be built and planning applications currently in the system for another 1,000. The Housing Trajectory for the Local Plan identifies capacity for 27,700 by 2030 and beyond this a total capacity for 40,000 new homes. This translates into a target of 1925 homes per year. The Mayor of London will shortly publish his timetable for updating the London Plan and as part of this will undertake a Strategic Housing Land Availability Assessment in partnership with the London Councils. Out of this exercise will come the Council's new net housing supply target which is likely to be around 1925

		net new homes per year. This is clearly a significant increase on the Councils current target but reflects the Council's ambitious growth agenda and commitment to significantly improving housing delivery. Completions for 16/17 and 17/18 are forecast to be similar to 18/19. However as set out in KPI 29 a number of large housing schemes have been approved recently and these will deliver significant higher completion rates in 18/19 onwards.

Annual Result	
2016/17	Available September 2017
Target	1236 net new homes a year
2015/16	746

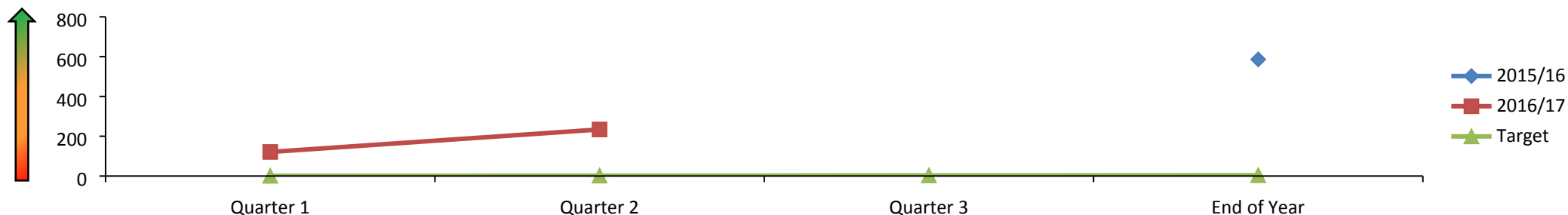| FINANCE, GROWTH AND INVESTMENT			Quarter 2 2016/17
KPI 28- The number of new homes completed that are sub-market (Annual Indicator)			
Definition	The proportion of net new homes built in each financial year that meet the definition of affordable housing in the National Planning Policy Framework	**How this indicator works**	Each year the Council updates the London Development Database by the deadline of August 31. This is the London-wide database of planning approvals and development completions.
What good looks like	The Mayor of London is likely to set out a target of 35-50% of all new homes as affordable across London in Supplementary Planning Guidance due to be issued in November. Good would be anything within this range. Anything over 50% and anything below 35% would not be good. Anything below 35% would indicate the Council has not been successful in securing affordable housing on market housing schemes but equally anything above 50% would suggest an overreliance on supply of housing from Council and RSL developments and lack of delivery of homes for private sale or rent on the big private sector led developments. This has historically been an issue in Barking and Dagenham and explains why the proportion of new homes which are affordable is one of highest in London over the last five years.	**Why this indicator is important**	This indicator is important for the reasons given in the other boxes.
History with this indicator	LBBD is one of best performing boroughs . The London Annual Monitoring Report shows that 49% of all new homes built between 2011/12 and 2013/14 were affordable. This was the highest proportion in London	**Any issues to consider**	The Growth Commission was clear that the traditional debate about tenure is less important than creating social justice and a more diverse community using the policies and funding as well as the market to deliver. At the same time the new Mayor of London

	and in terms of numbers the 10th highest of the 33 London Councils. In 14/15 68% of new homes were affordable. Data will shortly be available for 15/16 when the London Development Database is updated. As explained above though the target should be to keep the proportion of new affordable homes within the 35%-50% range.		pledged that 50% of all new homes should be affordable and within this a commitment to deliver homes at an affordable, "living rent". This chimes with the evidence in the Council's Joint Strategic House Market Assessment which identified that 52% of all new homes built each year in the borough should be affordable to meet housing need and that the majority of households in housing need could afford nothing other than homes at 50% or less than market rents. This must be balanced with the Growth Commission's focus on home ownership and aspirational housing and what it is actually viable to deliver. The Council will need to review its approach to affordable housing in the light of the Mayor's forthcoming guidance and take this forward in the review of the Local Plan.
	Annual Result		
2016/17	Available September 2017		
Target	The Council does not have an annual target for net new homes completed that are sub-market. London-wide the London Plan aims for 40% of all new homes as affordable but this is not expressed as a target.		
2015/16	19 social rented (gross 86), 83 intermediate/SO and 223 affordable rent. Net total 325 (43% of total housing completions)		

FINANCE, GROWTH AND INVESTMENT	Quarter 2 2016/17
KPI 29 – The number of new homes that have received planning consent	

Definition	Number of new homes that received planning permission.	**How this indicator works**	The data is recorded on the London Development Database
What good looks like	To determine this requires an analysis of the pipeline of supply against the housing trajectory. From consent to build is roughly 18 months to two years therefore for the housing trajectory to be maintained the schemes on it should be approved 18 months to two years before we anticipate units starting to be completed. Therefore, there is not a numerical target for this indicator.	**Why this indicator is important**	It helps to determine whether we are on track to deliver the housing trajectory and therefore the Council's growth agenda and the related proceeds of development, Community Infrastructure Levy, New Homes Bonus and Council Tax.
History with this indicator	There are currently permissions for 13,000 homes in the borough that have not been built. This includes Barking Riverside, 10,000 homes, Gascoigne 1575, Freshwharf 911 Cambridge Road 274 and Trocoll House 198.	**Any issues to consider**	The impact of the Mayor of London's emerging affordable housing policy on sites coming forward.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	163	234			**n/a**
Target	This is annual net housing completions target in London Plan. This is being reviewed in development of Local Plan in line with the ambition to complete 35,000 net new homes by 2035. We do not have a target for approval. We will consider how to go about setting a target taking into account the backlog of				

	unimplemented approvals that exist.	
2015/16	Previously reported annually	586

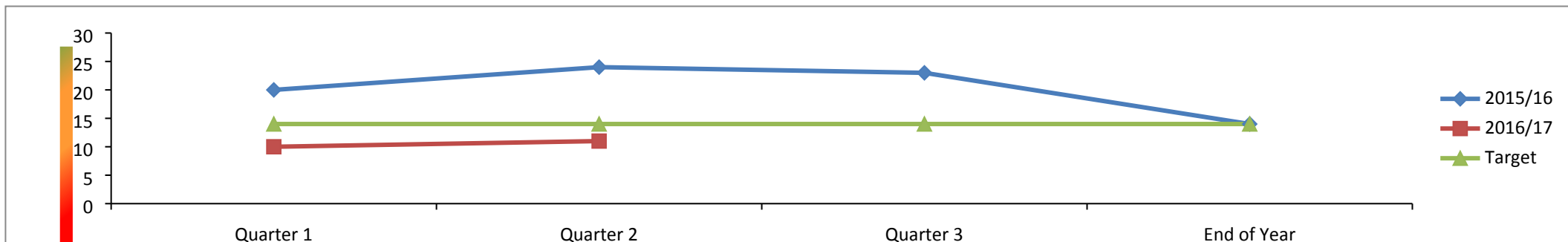| Performance Overview | In the last two quarters a number of housing zone sites have been approved including Cambridge Road 274, Abbey Industrial Park 118 and Trocoll House 198. In addition in the first and second quarters 16/17 the Council's planning committee has approved the Abbey Retail Park scheme 597 and Barking Riverside 10800. Planning permission for these schemes will be granted in the third quarter once the S106 agreements have been signed. Planning applications have also been received for the Abbey Sports Centre 150 and Vicarage Fields sites 850 which will be determined within this financial year. Finally the London Road/James Street, Gascoigne West and Crown House schemes are due in this year for approximately an additional 1000 homes. | Actions to sustain or improve performance | Set up BE-FIRST to improve delivery. Delivering agreed Housing Zone outputs with GLA. Recruitment and retention remains a significant issue in the Council's Development Management Team. Two posts are covered by agency staff and a further recruitment exercise will begin shortly to try and fill these posts with permanent staff. Planning Performance Agreements are now used on all major sites so that developers and the Council agree on the timeline for their decision and the resources required to achieve this. |
| **n/a** | | | |
| Benchmarking | The Benchmark is the Council's Housing Trajectory and the recent approvals, submissions and planning submissions are in line with its forecast of housing completions. | | |

FINANCE, GROWTH AND INVESTMENT	Quarter 2 2016/17
KPI 30 – The average number of days taken to process Housing Benefit / Council Tax Benefit change events	

Definition	The average time taken in calendar days to process all change events in Housing Benefit and Council Tax Benefit	How this indicator works	The indicator measures the speed of processing
What good looks like	To reduce the number of days it takes to process HB/CT change events	Why this indicator is important	Residents will not be required to wait a long time before any changes in their finances
History with this indicator	2014/15 End of year result – 9 days 2015/16 End of year result – 14 days	Any issues to consider	There are no seasonal variances, but however government changes relating to welfare reform, along with DWP automated communications pertaining to changes in household income impact heavily on volumes and therefore performance.

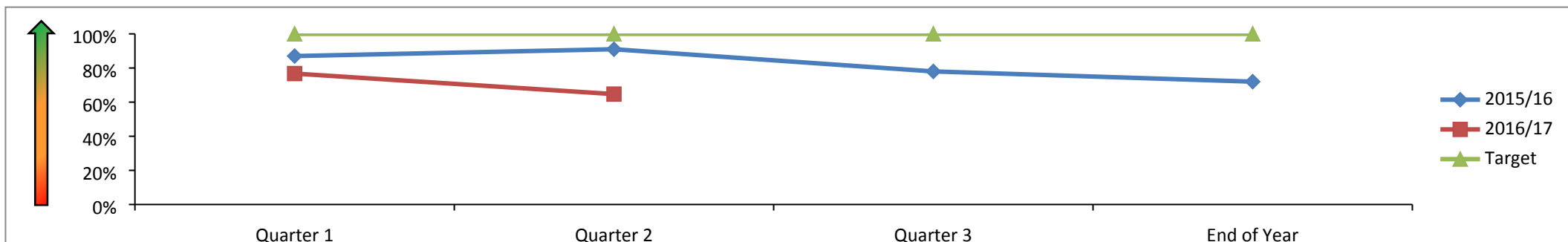|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	10	11			↑

Target	14	14	14	14	
2015/16	20	24	23	14	

Performance Overview	Performance has increased slightly from last quarter by one day but has remained below the target. This relates to an increase in Automated updates from DWP pertaining to Tax Credits requiring more physical intervention from back office staff to implement.	Actions to sustain or improve performance	Whilst volumes remain high due to various welfare reform impacts, the service has now stabilised the processing times, and is consistently now achieving or exceeding this target.
G			
Benchmarking	London Family Group (as per Elevate contract) 2015/15 – Lower quartile 8.5 days, Upper quartile 4.5 days, Average 7 days		

FINANCE, GROWTH AND INVESTMENT			Quarter 2 2016/17
KPI 31 – The percentage of Member enquiries responded to within deadline			
Definition	The percentage of Member enquiries responded to in 10 working days	How this indicator works	Of the total number of Member enquiries received, the percentage that are responded to within the timescale.
What good looks like	Comparable with London and National	Why this indicator is important	The community often request support from members on issues important to them. A quick response rate will assist with Council reputation.
History with this indicator	2015/16 end of year result – 72% 2014/15 end of year result – 88%	Any issues to consider	Quality of response must also be taken into account.
	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from 2015/16**

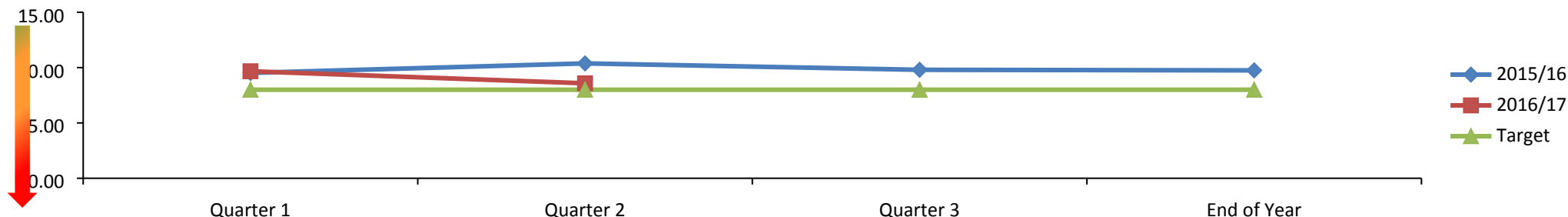|	Quarter 1	Quarter 2	Quarter 3	End of Year	
2016/17 Quarter	76.74%	52.66%			
2016/17 YTD	76.74%	64.7%			↓
Target	100%	100%	100%	100%	
2015/16	87%	91%	78%	72%	

Performance Overview		Performance on the last quarter has declined. This is because service areas are failing to respond within the deadlines.	**Actions to sustain or improve performance**	Completion of the restructure and the training programme for the new roles will enable staff to support the service areas in answering enquires.
R				
Benchmarking		No benchmarking data available – local measure only.		

FINANCE, GROWTH AND INVESTMENT			Quarter 2 2016/17
KPI 32 – The average number of days lost due to sickness absence			
Definition	The average number of days sickness across the Council, (excluding staff employed directly by schools). This is calculated over a 12 month rolling year, and includes leavers.	**How this indicator works**	The sickness absence data is monitored closely by the Workforce Board and a HR Project Group meets weekly to review this and identify "hot spots", to ensure that appropriate action is being taken. Managers also have a "dash board" on Oracle to monitor sickness in their areas.
What good looks like	That the target of 8 days by 31 December 2016 is achieved and maintained.	**Why this indicator is important**	This indicator is important because of the cost to the Organisation of sickness absence and for the well being of it's employees, which is why the emphasis is on early intervention wherever possible.
History with this indicator	Sickness absence rates have gone up and own, which may be for various reasons and changes to the workforce with groups of employees transferring in or out makes comparison difficult.	**Any issues to consider**	Mandatory briefings sessions are being held for managers, similar to when the Managing Attendance (Sickness Absence) Procedure was introduced in 2013, to ensure that they understand their responsibilities, and take appropriate action when employees hit the "trigger points".

Monthly average	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	9.67	8.58			
Target	8	8	8	8	↑
2015/16	9.52	10.38	9.80	9.75	

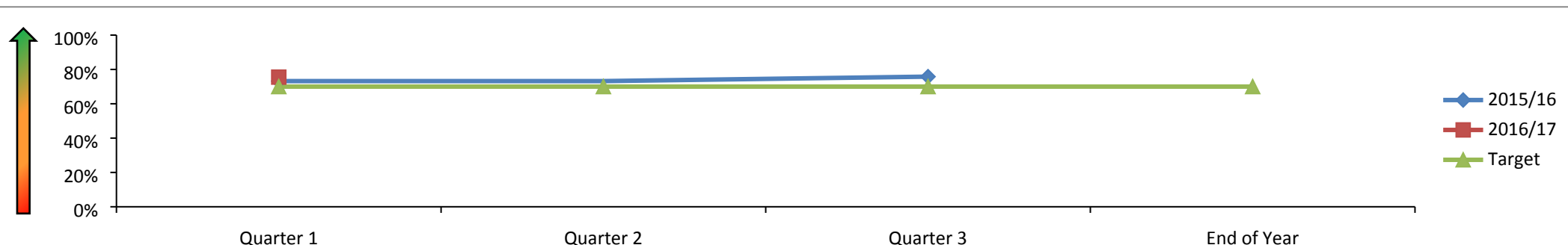| Performance Overview			Sickness briefings continue to be held and by early November over 400 managers and supervisors will have attended. The session ensures that managers are clear about the procedure and monitoring arrangements. Evaluation so far indicate that knowledge of the procedure and responsibilities has increased as a result and 100% of those attending are now fully aware of expectations.
A	There has been a significant reduction of over 1 day average sickness absence for Quarter 2. Although we have not yet met the target of 8 days, if this trend continues we will be back on track. This reflects the impact that interventions reintroduced 12 months ago have had - communication, escalation, monitoring, and management of absence. The spike in average absence experienced in August 2015 will now fall outside of the 12 month rolling period. It is anticipated that absence will therefore continue to fall due to the reporting period and reintroduction of proactive measures.	Actions to sustain or improve performance	Monitoring reports have been received by the Workforce Board and Leadership Group. Summary information has been provided at the Sickness Briefings. Compliance reports will be circulated from November 2016 to all Directors, which will cover monitoring and compliance with the policy measures. We are also seeing a reduction in absence (average days lost) when we exclude leavers, indicating that management of absence is having an impact. It will take a number of months for this improvement to show on the BVPI figure. Analysis shows that a significant number of staff – over 2000 have had no absence over the last 12 months, and our scrutiny of the data will ensure that we target resources on the areas where interventions are required. New hotspots will be designated in November. A workplace flu immunisation programme has just begun and the sickness briefings for managers reinforces the importance of wellbeing, proactive management of health and a positive attendance culture. The Council has been accredited with the Mayor of London Healthy Work Place award at commitment level. We are working on actions which should help us to reach achievement and excellence level. These actions will all continue to promote good health and wellbeing within the workplace.
Benchmarking	The average performance in London is 7.9 days, (across 27 authorities which collect data through the London Authority Performance System (LAPS). This includes some Councils with small numbers of 'blue collar' staff and sickness levels tend to be lower in these authorities, which will influence the overall average.		

FINANCE GROWTH AND INVESTMENT — Quarter 2 2016/17

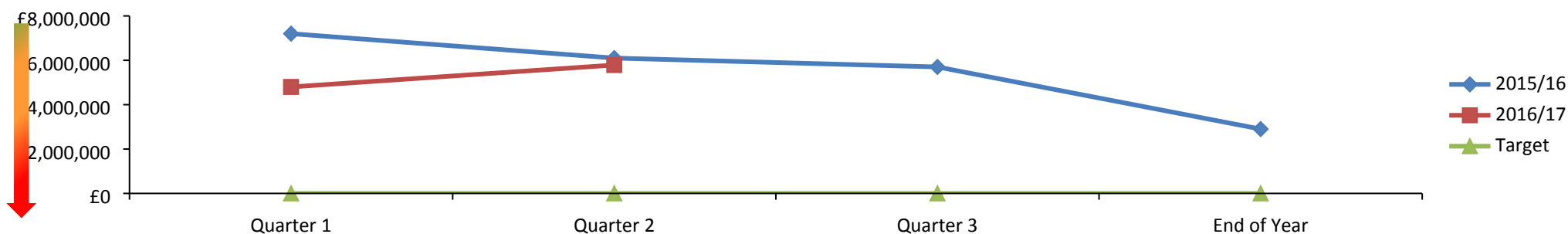### KPI 33 – The percentage of staff who are satisfied working for the Council

Definition	The responses to questions in the Staff Temperature Check Survey on working for the Council.	How this indicator works	This is a survey of a representative cross section of the workforce and is followed by focus groups to explore the results. The results are reported to the Workforce Board, Members at the Employee Joint Consultative Committee, Trade Unions and Staff Networks and published on Intranet

	What good looks like	That the positive response rate is maintained and continues to improve.	Why this indicator is important	Staff temperature checks are "statistically valid" and this indicator provides an important measure of how staff are engaged when going through major changes; it gives them an opportunity to say how this is impacting on them.
History with this indicator	The Staff Temperature Check Survey is run two or three times a year and the questions are linked to those in the all Staff Survey to enable benchmarking with previous years back to 2006.		**Any issues to consider**	Depends on how changes and restructures continue to be managed locally and / or the impact on the individuals in those areas.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	75.52%	Survey not conducted			
Target	70%	70%	70%	70%	↑
2015/16	73.20%	Survey not conducted	75.80%	Survey not conducted	

Performance Overview	The survey was last conducted at Quarter 1 and will take place again during Quarter 3. The previous quarter's results should generally be seen as positive. This temperature check had a different methodology where the whole workforce was asked to take part, and 1500 paper copies were sent to staff with limited access to computers in their work. For this reason, we were able to reach staff who have traditionally not taken part in surveys, and this is reflected in the results.	**Actions to sustain or improve performance**	We are working with managers of "front-line" teams to identify communication and engagement barriers.
G			
Benchmarking	No benchmarking data available – Local measure only		

	Definition	The position the council is in compared to the balanced budget it has set to run its services.	How this indicator works	Monitors the over or under spend of the revenue budget account
	What good looks like	In line with projections, with no over spend.	**Why this indicator is important**	It is a legal requirement to set a balanced budget.
	History with this indicator	2015/16 end of year result - £2.9m overspend 2014/15 end of year result - £0.07m overspend	**Any issues to consider**	No current issues to consider.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	£4,800,000	£5,796,000			↑
2015/16	£7,200,000	£6,100,000	£5,700,000	£2,900,000	

Performance Overview	The projected overspend relates primarily to Homelessness, Children's Services and Leisure partially offset by central underspends It should be noted that expenditure projections tend to reduce as the year goes on. However, if the project team is not successful in reducing expenditure then options such as a spending freeze will be considered.	**Actions to sustain or improve performance**	A project team continues to work on reducing expenditure in children's services and this has been monitored at a detailed level. An action plan is being developed to review the position on homelessness.
n/a			
Benchmarking	No benchmarking data available – Local measure only		

Economic and Social Development Key Performance Indicators 2016/17

Definition	Repeat Incidents of Domestic Violence as reported to the Multi Agency Risk Assessment Conference (MARAC)	**How this indicator works**	Victims of domestic violence referred to a MARAC will be those who have been identified (often by the police) as high or very high risk (i.e. of serious injury or of being killed) based on a common risk assessment tool that is informed by both victim and assessor information.Repeat victimisation refers to a violent incident occurring within 12 months of the original incident coming to the MARAC
What good looks like	The local target recommended by Safelives is to achieve a repeat referrals rate of between 28-40%. The target is based on the level of DV in the borough and rate of referral to MARAC. This target was set during the first study of MARACs where Amanda Robinson from former Coordinated Action Against Domestic Abuse (CAADA now Safelives) observed repeat rates of around 40% with some variance. A lower than expected rate usually incidents that not all repeat victims are being identified and referred back to MARAC. All agencies should have the capacity to 'flag and tag' MARAC cases in order to identify any further incidents within a year of the last referral and re-refer the cases to MARAC. A low repeat rate often indicates that these systems are not or only partially in place	**Why this indicator is important**	Safelives recommends a rate of 28-40% because domestic violence is rarely a one off incident. It is a pattern of behaviour that escalates over time. Therefore, for high risk cases even where a support plan has been put into action, it would be normal for other incidents of DV to occur. So in order to manage high risk cases, if another incident occurs within a 12 month period, the case should be referred back to MARAC and is counted as a repeat. Where MARACs are not receiving the recommended levels of repeat referrals Safelives recommend that the MARAC review information flows from partnership services to the MARAC to ensure MARAC is well informed about all incidents and developments in the case, that these changes are being assessed and that the victims are receiving ongoing support.
History with this indicator	2015/16: 86 (25%) 2014/15: 58 (20%)	**Any issues to consider**	Safelives guidance states that to manage high risk cases if another incident were to occur within a 12 month period the case should be referred back to MARAC and counted as a repeat. We note locally that we have some clients return to MARAC but they are outside of the 12 month time-frame and therefore are not counted as a repeat. If the same clients return to MARAC but with another perpetrator these are not counted as a repeat. This is standard practice amongst all boroughs.

	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from 2015/16**
2016/17	23%	24%			
Target	28% - 40%	28% - 40%	28% - 40%	28% - 40%	↓
2015/16	26%	27%	24%	26%	

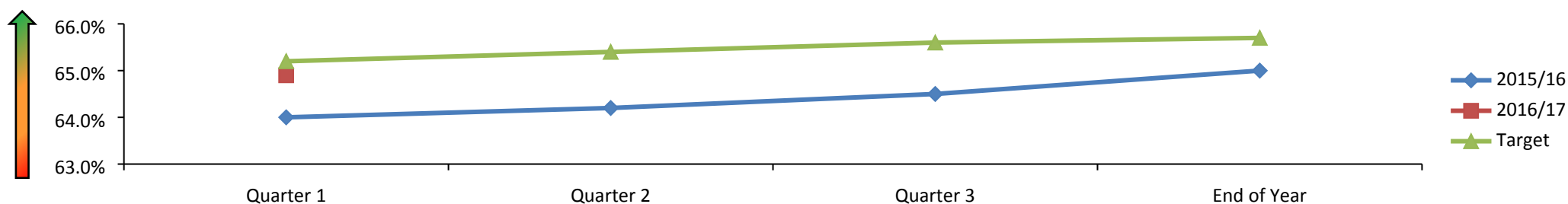|			
Performance Overview	In Qtr 2 we are 24%, the target for 2016/17 is 28 – 40 %. This is below the local target set by Safelives is 28-40%.	**Actions to sustain or improve performance**	The Community Safety Partnership successfully bid for MOPAC funding to conduct a MARAC Review. An independent consultancy was commissioned to undertake the review, which has now concluded. A number of recommendations were made and improving the boroughs identification of repeat victims to MARAC will be included in the action plan to deliver recommendations of the MARAC review.
A			
Benchmarking	Benchmarking data is available from Safelives on the level of repeat referrals to MARAC. The latest data is for 1st April 2015 – 31st March 2016 where there averages for London, our Most Similar Group (MSG) and national was 20%, 26% and 25% respectively. Safelives have produced a comparison of all 32 boroughs repeat rates. Barking		

and Dagenham are had the 6th highest rate of repeat referrals to the MARAC in 2015/16.Taking this and the corporate performance teams guidance on RAG rating into consideration we have updated the performance to Amber (performance is within 10% of the target)

ECONOMIC AND SOCIAL DEVELOPMENT — Quarter 2 2016/17

KPI 36 – The percentage of economically active people in employment

Definition	"The employed are defined as those aged 16 or over, who are in employment if they did **at least one hour of work** in the reference week (as an employee, as self-employed, as unpaid workers in a family business, or as participants in government-supported training schemes), and those who had a job that they were temporarily away from (for example, if they are on holiday)."	**How this indicator works**	The figures presented for Barking & Dagenham are a rolling average of the last three years (e.g. Q1 figures are an average of July 13-June 14, July 14-June 15 and July 15-June 16). The reason for this is that the figure is derived from a sample survey (the Annual Population Survey).
What good looks like	An increase in the percentage of our economically active residents who are in employment.	**Why this indicator is important**	Employment is important for health and wellbeing of the community and reducing poverty
History with this indicator	The employment rate for the borough is principally driven by London and economy-wide factors. The figure for the borough has shown steady growth over the last year.	**Any issues to consider**	Each 1% for the borough is equivalent to a little over 1,200 borough residents.

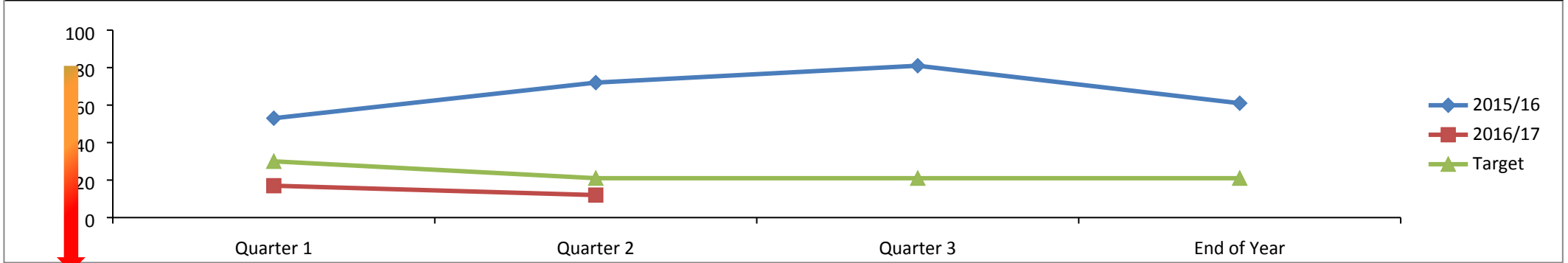|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	64.9%	Available at Quarter 3			↑
Target	65.2%	65.4%	65.6%	65.7%	
2015/16	64.0%	64.2%	64.5%	65.0%	

Performance Overview **A**	The published figure for the borough is 64.5%, with the rolling average figure 64.9%.	**Actions to sustain or improve performance**	The Barking & Dagenham Employability Partnership brings together a range of partners, including DWP and Work Programme Providers who are collaborating to reduce the claimant count and the numbers claiming income support or employment & support allowance. The next meeting is 20 October and the Partnership is listed as a thematic sub-group of the B&D Delivery Partnership. Officers will ensure that ESF-funded provision which comes on stream is effectively integrated into the work of the partnership. A Welfare Reform Team is in the process of contacting all those affected by the benefit cap ahead of the further reduction in November 2016. The Job Shop

				Service will be delivering sessions in both JCP offices in the borough accompanied by members of the team. The findings from this work will feed into the Community Solutions programme as it develops.
Benchmarking	The gap with the London-wide figure (73.2%) is now 8.3%. Over 11,000 additional residents would need to move into work to match the London employment rate.			

ECONOMIC AND SOCIAL DEVELOPMENT	Quarter 2 2016/17

KPI 37 – The average number of households in Bed and Breakfast

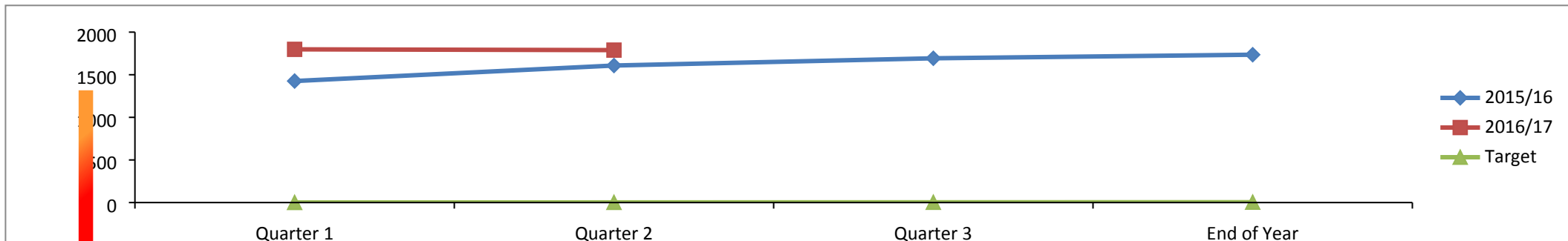| **Definition**	Number of homeless households residing in B & B including households with dependent children or household member pregnant	**How this indicator works**	Snapshot of households occupying B & B at end of each month.
What good looks like	In order to satisfy budget pressures, end of year average of 21 households in B & B would be considered excellent	**Why this indicator is important**	Statutory requirement and financial impact on General Fund
History with this indicator	Historically target was not met	**Any issues to consider**	Increasing demand on homelessness, impact of welfare reform, impact of housing market and regeneration programme.

	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from 2015/16**
2016/17	17	12			
Target	30	21	21	21	↑
2015/16	53	72	81	61	

Performance Overview	Numbers of households within B & B	**Actions to sustain or**	Alternative Hostel sites are being sought to reduce dependency upon bed and breakfast. There are ongoing initiatives to increase the supply of PSL accommodation and there has been a price reduction negotiated with the local

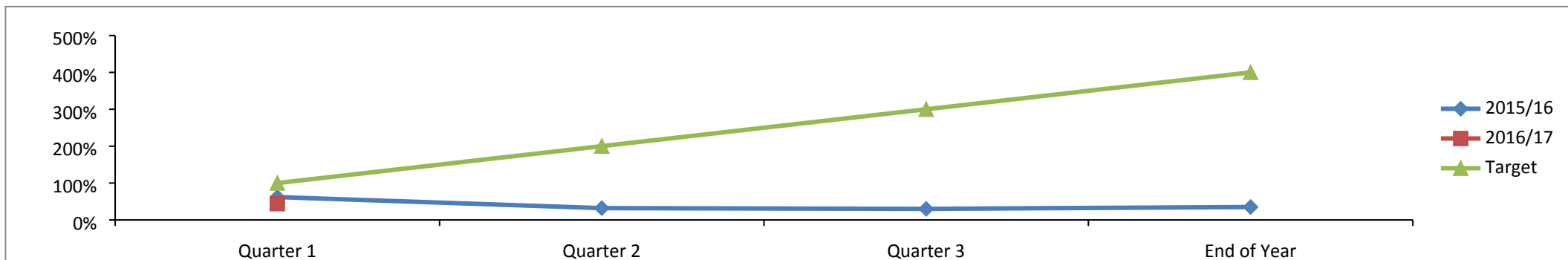|			
G	accommodated in B & B at the end of September 2016. Target has been realigned with input from Finance Team, to ensure any usage of B & B is in line with Financial constraints.	performance	bed and breakfast provider. Case management and homeless prevention options are under constant review to limit the number of households placed in temporary accommodation.
Benchmarking	No benchmarking data available.		

ECONOMIC AND SOCIAL DEVELOPMENT	Quarter 2 2016/17

KPI 38 – The average number of households in Temporary Accommodation

Definition	Number of households in all forms of temporary accommodation, B&B, nightly Let, Council decant, Private Sector Licence (in borough and out of borough)	**How this indicator works**	Snapshot of households in temporary accommodation at end of each month
What good looks like	Increase in temporary accommodation / PSL supply however with a reduction in the financial loss to the Council leading to a cost neutral service	**Why this indicator is important**	Financial impact on General Fund
History with this indicator	PSL accommodation was considered cost neutral. Due to market demands, landlords/agents can now request higher rentals exceeding LHA rates	**Any issues to consider**	Increasing demand on homelessness, impact of welfare reform, impact of housing market and regeneration programme.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17	1,798	1,789			↓
2015/16	1,426	1,608	1,693	1,735	

Performance Overview **n/a**	Increase in trend of acquiring good quality self-contained accommodation to meet homelessness demands. There is a reluctance to set a target for the where the average number of households should be. Demands for Housing continue to increase due to impacts of the prevailing Housing market trends with concerns of the impact of Welfare Benefit Reform in November.	**Actions to sustain or improve performance**	Hostel expansion programme. Collaborative working within Housing Options and delivering new ways of working in line with Andy Gale critical analysis report of service.
Benchmarking	No benchmarking data available		

ECONOMIC AND SOCIAL DEVELOPMENT — Quarter 2 2016/17

KPI 39 – The percentage of complaints upheld

Definition	The percentage of complaints upheld	**How this indicator works**	Of the total number of complaints received the number that are deemed to be upheld
What good looks like	Comparable with London and National	**Why this indicator is important**	Lower number of complaints upheld indicates that the Council is providing an adequate or good service.
History with this indicator	2015/16 End of year result – 35%	**Any issues to consider**	Quality of response must also be taken into account.

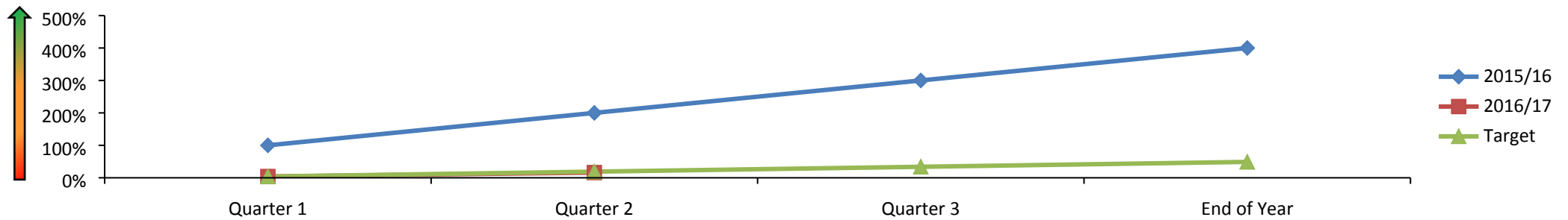|	Quarter 1	Quarter 2	Quarter 3	Quarter 4	DOT from 2015/16
2016/17 Quarter	44%	41%			**n/a**
2016/17 YTD	44%	44%			

2015/16	62%	32%	30%	35%	

Performance Overview	Overall, when looking at the year to date figures, performance has remained static over the past 6 months.	Actions to sustain or improve performance	A restructure of the complaints team has been undertaken alongside a review of the complaints process.
n/a			
Benchmarking	Local Government Ombudsman Annual Review of Local Government Complaints 2015/16 showed that the number of complaints upheld by them in Barking and Dagenham has gone down.		

ECONOMIC AND SOCIAL DEVELOPMENT			Quarter 2 2016/17
KPI 40 – The percentage of people affected by the benefit cap now uncapped			
Definition	Percentage of people affected by welfare reform changes now uncapped / off the cap	How this indicator works	For a resident to be outside of the benefit cap (off the cap), they either need to find employment (more than 16 hours) and claim Working Tax Credit or be in receipt of a benefit outside of the cap; Personal Independence Payment, Disability Living Allowance, Attendance Allowance, Employment Support Allowance (care component) and (up-coming in September 2016) Carers Allowances or Guardians Allowance.
What good looks like	Moving residents from a position of being in receipt of out-of-work benefit (Income Support / Employment Support Allowance or Job Seekers Allowance) to working a minimum of 16 hours (if a single parent) or 24 hours (if a couple) or receiving a disability benefit which moves residents outside of the cap.	Why this indicator is important	Welfare reform changes impact on resident's income which will affect budgets, choices and lifestyle. Financial impact on General Fund

History with this indicator	This is a new indicator introduced in 2016/17.		Any issues to consider	The Capped/Uncapped status of a resident is not solely down to the Welfare Reform (WR) team work but includes both Housing Benefit (HB) and the Department of Works & Pension (DWP). If the DWP do not confirm the uncapped status of a resident then HB do not removed this status on academy. All our information comes from the DWP, via HB.
	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from 2015/16**

	Quarter 1	**Quarter 2**	**Quarter 3**	**Quarter 4**	**DOT from 2015/16**
2016/17	3.9%	16.07%			
Target	3.9%	18.9%	33.9%	48.9%	**n/a**
2015/16	New indicator for 2016/17				

Performance Overview	This number is slightly below target but reflects the difficulty in getting voluntary engagement. However the reduced cap comes into effect on November 7th and this is likely to prompt better responses from customers when the benefit is capped or reduced further for those already capped.	**Actions to sustain or improve performance**	The Service is currently undergoing a review with a view to increasing customer engagement and getting more people off the cap. Operational processes are under review and closer links with Job Centres, Jobs Shops, Revenues and Benefits and Council tenant rent income team are being forged to increase customer engagement and deliver a joint approach to supporting those affected to take action to avoid being capped.
A			
Benchmarking	No benchmarking data available – Local measure only		